Fill in this information to identify your case:	
United States Bankruptcy Court for the:	
Middle District of Florida	
Case number (If known):	Chapter you are filing under: Chapter 7
	Chapter 11 Chapter 12
	Chapter 13

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	art 1: Identify Yourself			
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):	
1. Your full name Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting		James First name Leroy Middle name Sephton Last name	First name Middle name Last name	
	with the trustee.	Jr Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)	
2.	All other names you have used in the last 8 years Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx - xx - <u>8</u> <u>1</u> <u>4</u> <u>7</u> OR 9 xx - xx	xxx - xx	

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4. Any business names and Employer Identification Numbers (EIN) you have used in		✓ I have not used any business names or EINs.	I have not used any business names or EINs.
	the last 8 years	Business name	Business name
	Include trade names and doing business as names	Business name	Business name
		EIN	EIN
		EIN	EIN
5.	Where you live		If Debtor 2 lives at a different address:
		7631 SW 82 PL	
		Number Street	Number Street
		Ocala FL 34476	
		City State ZIP Code	City State ZIP Code
		Marion County	- County
		County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number Street	Number Street
		P.O. Box	P.O. Box
		City State ZIP Code	City State ZIP Code
6.	Why you are choosing	Check one:	Check one:
	this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain.	I have another reason. Explain.
		(See 28 U.S.C. § 1408.)	(See 28 U.S.C. § 1408.)

Pa	rt 2: Tell the Court Al	bout Your Bank	ruptcy Case				
7.	The chapter of the Bankruptcy Code you are choosing to file under		cy (Form 2010)). Also, go t 7 11 12			S.C. § 342(b) for Individuals Filing appropriate box.	
8.	How you will pay the fe	local couyourself, submittir with a pr I need to Application I reques By law, a less than pay the f	 ✓ I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. ✓ I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). ✓ I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. 				
	Have you filed for [bankruptcy within the last 8 years?	District			When	Case number Case number Case number	
10.	affiliate?	Yes. Yes. Debtor District Debtor		When _	Rela	lationship to you Case number, if known tionship to you Case number, if known	
11.	Do you rent your residence?	Yes. Has	to line 12. s your landlord obtained a No. Go to line 12. Yes. Fill out <i>Initial Staten</i> this bankruptcy petition.	, ,		gainst You (Form 101A) and file it wi	ith

Are you a sole proprietor of any full- or part-time business?	No. Go to Part 4. Yes. Name and location of business				
A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.	Name of business, if any Number Street				
If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.	City State ZIP Code				
	Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A))				
	☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))				
	☐ Commodity Broker (as defined in 11 U.S.C. § 101(6)) ☐ None of the above				
B. Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i>	you are filing under Chapter 11, the court must know whether you are a small business debtor so that it an set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your ost recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if my of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).				
debtor? For a definition of small	☑ No. I am not filing under Chapter 11.				
business debtor, see 11 U.S.C. § 101(51D).	No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.				
	Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.				
art 4: Report if You Own	r Have Any Hazardous Property or Any Property That Needs Immediate Attention				
Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to	✓No Yes. What is the hazard?				
public health or safety? Or do you own any property that needs immediate attention?	If immediate attention is needed, why is it needed?				
For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?	Where is the property?				

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

	About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
	You must check one	2 :	You must check of	ne:
t	counseling age filed this bankr certificate of co	•	counseling ag filed this ban certificate of	•
		the certificate and the payment you developed with the agency.		of the certificate and the payment at you developed with the agency.
	counseling age	efing from an approved credit ncy within the 180 days before I uptcy petition, but I do not have a impletion.	counseling a	riefing from an approved credit gency within the 180 days before I kruptcy petition, but I do not have a completion.
		fter you file this bankruptcy petition, copy of the certificate and payment		after you file this bankruptcy petition, a copy of the certificate and payment
•	services from a unable to obtain days after I made	sked for credit counseling n approved agency, but was n those services during the 7 de my request, and exigent merit a 30-day temporary waiver ent.	services from unable to obt days after I m	asked for credit counseling an approved agency, but was ain those services during the 7 ade my request, and exigent as merit a 30-day temporary waiver ment.
	requirement, atta what efforts you you were unable	day temporary waiver of the ach a separate sheet explaining made to obtain the briefing, why to obtain it before you filed for what exigent circumstances ile this case.	requirement, a what efforts yo you were unab	O-day temporary waiver of the ttach a separate sheet explaining by made to obtain the briefing, why ble to obtain it before you filed for and what exigent circumstances of file this case.
	dissatisfied with	oe dismissed if the court is your reasons for not receiving a ou filed for bankruptcy.	dissatisfied with	y be dismissed if the court is h your reasons for not receiving a you filed for bankruptcy.
	If the court is sall still receive a bri You must file a cagency, along w	risfied with your reasons, you must be seling within 30 days after you file. The sertificate from the approved with a copy of the payment plan you by. If you do not do so, your case	If the court is s still receive a b You must file a agency, along	atisfied with your reasons, you must briefing within 30 days after you file. a certificate from the approved with a copy of the payment plan you any. If you do not do so, your case
		f the 30-day deadline is granted nd is limited to a maximum of 15		of the 30-day deadline is granted and is limited to a maximum of 15
	I am not require credit counseling	ed to receive a briefing abouting because of:		ired to receive a briefing about ling because of:
	☐ Incapacity.	I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.	☐ Incapacity	I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
	Disability.	My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.	☐ Disability.	My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.
	Active duty.	I am currently on active military duty in a military combat zone.	Active dut	y. I am currently on active military duty in a military combat zone.
	briefing about cr	u are not required to receive a edit counseling, you must file a	briefing about	you are not required to receive a credit counseling, you must file a

Pa	rt 6: Answer These Ques	stions for Reporting Purposes	:				
-	What kind of debts do you have?	16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b. ☐ Yes. Go to line 17.					
		16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.					
		No. Go to line 16c. Yes. Go to line 17.					
		16c. State the type of debts you ov	we that are not consumer de	ebts or business de	bts.		
	Are you filing under Chapter 7?	No. I am not filing under Chap	oter 7. Go to line 18.				
	Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	Yes. I am filing under Chapter administrative expenses a No	7. Do you estimate that afte are paid that funds will be a	er any exempt prope vailable to distribute	erty is excluded and e to unsecured creditors?		
	How many creditors do you estimate that you owe?	☐ 1-49 ✓ 50-99 ☐ 100-199 ☐ 200-999	1,000-5,000 5,001-10,000 10,001-25,000		25,001-50,000 50,001-100,000 More than 100,000		
	How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 millio \$10,000,001-\$50 millio \$50,000,001-\$100 m \$100,000,001-\$500 r	lion	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion		
	How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 millio \$10,000,001-\$50 mill \$50,000,001-\$100 m \$100,000,001-\$500 r	lion	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion		
Pa	rt 7: Sign Below						
Fo	r you	I have examined this petition, and correct.	I declare under penalty of p	perjury that the infor	mation provided is true and		
		If I have chosen to file under Chap of title 11, United States Code. I un under Chapter 7.					
If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fil this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).							
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.					
		I understand making a false statement, concealing property, or obtaining money or property by fraud in connect with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.					
		/s/ James Leroy Sephton	Jr 💃	6			
		Signature of Debtor 1		Signature of Deb	tor 2		
		Executed on Executed on					

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Damien Aranguren	Date	08/02/2019
Signature of Attorney for Debtor		MM / DD /YYYY
Damien Aranguren		
Printed name		
Law Offices of Justin McMurray		
Firm name		
118 W. Fort King Street		
Number Street		
Ocala	FL	34471
City	State	ZIP Code
	Ciaio	
Contact phone (888) 316-2131 ext 721		en@lojmpa.com
Contact phone (888) 316-2131 ext 721	damie	

Fill in this information to identify your case:						
Debtor 1						
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the: Middle District of Florida						
Case number	(If known)					

Check if	this	is	an
amende	d filii	nq	

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

	Your assets Value of what you own
. Schedule A/B: Property (Official Form 106A/B)	\$ 0.00
1a. Copy line 55, Total real estate, from Schedule A/B	· · · · · · · · · · · · · · · · · · ·
1b. Copy line 62, Total personal property, from Schedule A/B	\$ <u>13,377.73</u>
1c. Copy line 63, Total of all property on Schedule A/B	\$ <u>13,377.73</u>
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
 Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 	\$ <u>14,630.48</u>
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$ 141,850.00
Your total liabilities	\$ <u>156,480.48</u>
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$ <u>5,955.40</u>
5. Schedule J: Your Expenses (Official Form 106J)	_{\$} 6,277.82

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James Leroy Sephton Jr

,	

Debtor 1

Case number (if known)_____

P	art 4: Answer These Questions for Administrative and Statistical Records	s			
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?				
	No. You have nothing to report on this part of the form. Check this box and submit this form.✓ Yes	form to the court with your other schedules.			
7.	What kind of debt do you have?		Ī		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purpose.				
	☐ Your debts are not primarily consumer debts. You have nothing to report on this parthis form to the court with your other schedules.	art of the form. Check this box and submit			
8.	From the Statement of Your Current Monthly Income: Copy your total current monthly in Form 122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.	ncome from Official \$5,749.74			
9.	Copy the following special categories of claims from Part 4, line 6 of <i>Schedule E/F</i> :				
		Total claim			
	From Part 4 on <i>Schedule E/F</i> , copy the following:				
	9a. Domestic support obligations (Copy line 6a.)	\$			
	9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$			
	9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$			
	9d. Student loans. (Copy line 6f.)	\$			
	9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$			
	9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$			
	9g. Total. Add lines 9a through 9f.	\$			

Fill in this information to identify your case and this	08/02/19 P	age 10 of 86	
Debtor 1 James Leroy Sephton Jr First Name Middle Name	Last Name		
Debtor 2 (Spouse, if filing) First Name Middle Name	Last Name		
United States Bankruptcy Court for the: Middle District of Florid			
Case number			
			Check if this is an
			amended filing
Official Form 106A/B			
Schedule A/B: Property	У		12/15
In each category, separately list and describe items category where you think it fits best. Be as comple responsible for supplying correct information. If mowrite your name and case number (if known). Answers Part 1: Describe Each Residence, Building,	te and accurate as possible. If two married people ore space is needed, attach a separate sheet to the every question.	e are filing together, bo is form. On the top of a	th are equally
Do you own or have any legal or equitable interest			
No. Go to Part 2.			
Yes. Where is the property?	What is the property? Check all that apply. Single-family home	Do not deduct secured cla	
1.1. Street address, if available, or other description	Duplex or multi-unit building	Creditors Who Have Clain	
etroct addresses, if availables, or early decompiled.	☐ Condominium or cooperative ☐ Manufactured or mobile home	Current value of the entire property?	Current value of the portion you own?
	Land	\$	\$
City State ZIP Code	☐ Investment property ☐ Timeshare	Describe the nature of interest (such as fee	
City State ZIF Code	Other	the entireties, or a life	
	Who has an interest in the property? Check one.	Check if this is co	
County	☐ Debtor 1 only ☐ Debtor 2 only	Cneck if this is co	mmunity property
County	Debtor 1 and Debtor 2 only		
	At least one of the debtors and another		
	Other information you wish to add about this it property identification number:	em, such as local	
If you own or have more than one, list here:	What is the property? Check all that apply.	Do not deduct secured cla	aims or exemptions. Put
1.2.	Single-family home Duplex or multi-unit building	the amount of any secure Creditors Who Have Clain	d claims on <i>Schedule D:</i>
Street address, if available, or other description	Condominium or cooperative	Current value of the	Current value of the
	Manufactured or mobile home	entire property?	portion you own?
	Land Investment property	\$	\$
City State ZIP Code	Timeshare	Describe the nature of	
Oity State 211 Sode	Other	interest (such as fee the entireties, or a life	
	Who has an interest in the property? Check one. Debtor 1 only		
County	Debtor 2 only		
County	Debtor 1 and Debtor 2 only		mmunity property
	At least one of the debtors and another	(see instructions)	
	Other information you wish to add about this ite property identification number:	m, such as local	

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1				
1		What is the property? Check all that apply. ☐ Single-family home	Do not deduct secured cla	d claims on <i>Schedule D:</i>
	Street address, if available, or other description	Duplex or multi-unit building	Creditors Who Have Clair	ns Secured by Property.
	offeet address, if available, of other description	Condominium or cooperative	Current value of the entire property?	Current value of the portion you own?
		Manufactured or mobile home	\$	\$
			Ψ	¥
	City State ZIP Code	☐ Timeshare	Describe the nature of	of your ownership
	· · · · · · · · · · · · · · · · · · ·	Other	interest (such as fee the entireties, or a life	
		Who has an interest in the property? Check one.		
		Debtor 1 only		
	County	Debtor 2 only		
		Debtor 1 and Debtor 2 only		mmunity property
		At least one of the debtors and another	(see instructions)	
		Other information you wish to add about this ite property identification number:	em, such as local	
		Il of your entries from Part 1, including any entries		\$ <u>0.00</u>
you own to	hat someone else drives. If you lease a vehicle vans, trucks, tractors, sport utility vehicles	st in any vehicles, whether they are registered or a e, also report it on Schedule G: Executory Contracts as, motorcycles	-	5
you own to	hat someone else drives. If you lease a vehicle vans, trucks, tractors, sport utility vehicles	e, also report it on Schedule G: Executory Contracts on state of the second of the sec	-	5
you own to 3. Cars, No Ye 3.1.	hat someone else drives. If you lease a vehicle vans, trucks, tractors, sport utility vehicles es Make: Hyundai	e, also report it on Schedule G: Executory Contracts or, motorcycles Who has an interest in the property? Check one.	and Unexpired Leases. Do not deduct secured cla	aims or exemptions. Put
you own to 3. Cars, No Ye 3.1.	hat someone else drives. If you lease a vehicle vans, trucks, tractors, sport utility vehicles es	who has an interest in the property? Check one.	and Unexpired Leases.	aims or exemptions. Put d claims on <i>Schedule D:</i>
you own to 3. Cars, No Ye 3.1.	hat someone else drives. If you lease a vehicle vans, trucks, tractors, sport utility vehicles es Make: Hyundai Weloster	e, also report it on Schedule G: Executory Contracts of motorcycles Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured clathe amount of any securer Creditors Who Have Claim	aims or exemptions. Put d claims on <i>Schedule D:</i> ns Secured by Property.
you own to 3. Cars, No Ye 3.1.	hat someone else drives. If you lease a vehicle vans, trucks, tractors, sport utility vehicles best Make: Model: Year: 4015	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured clathe amount of any secure	aims or exemptions. Put d claims on <i>Schedule D:</i>
you own to 3. Cars, No Ye 3.1.	hat someone else drives. If you lease a vehicle vans, trucks, tractors, sport utility vehicles es Make: Hyundai Model: Veloster Year: 2015 Approximate mileage: 32445	e, also report it on Schedule G: Executory Contracts of motorcycles Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured clathe amount of any securer Creditors Who Have Claim Current value of the entire property?	aims or exemptions. Put d claims on <i>Schedule D:</i> ns Secured by Property. Current value of the portion you own?
you own to 3. Cars, No Ye 3.1.	hat someone else drives. If you lease a vehicle vans, trucks, tractors, sport utility vehicles es Make: Hyundai Model: Veloster Year: 2015 Approximate mileage: 32445 Other information:	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another	Do not deduct secured clathe amount of any secured Creditors Who Have Clair. Current value of the	aims or exemptions. Put d claims on <i>Schedule D:</i> ns Secured by Property. Current value of the
you own to 3. Cars, No Ye 3.1. Condit	hat someone else drives. If you lease a vehicle vans, trucks, tractors, sport utility vehicles es Make: Hyundai Model: Veloster Year: 2015 Approximate mileage: 32445	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured clathe amount of any securer Creditors Who Have Claim Current value of the entire property?	aims or exemptions. Put d claims on <i>Schedule D:</i> ns Secured by Property. Current value of the portion you own?
you own to 3. Cars, No Ye 3.1. Condit	hat someone else drives. If you lease a vehicle vans, trucks, tractors, sport utility vehicles of ess. Make: Hyundai Model: Veloster Year: 2015 Approximate mileage: 32445 Other information: tion: Very Good; NADA Value	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see	Do not deduct secured clathe amount of any securer Creditors Who Have Claim Current value of the entire property?	aims or exemptions. Put d claims on <i>Schedule D:</i> as Secured by Property. Current value of the portion you own? \$ 9,525.00
you own to 3. Cars, No Ye 3.1. Condit	hat someone else drives. If you lease a vehicle vans, trucks, tractors, sport utility vehicles of ess. Make: Hyundai Model: Veloster Year: 2015 Approximate mileage: 32445 Other information: tion: Very Good; NADA Value own or have more than one, describe here: Make:	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured clathe amount of any securer Creditors Who Have Clair. Current value of the entire property? \$ 9,525.00	aims or exemptions. Put d claims on <i>Schedule D:</i> ns Secured by Property. Current value of the portion you own? \$ 9,525.00
you own to 3. Cars, No Ye 3.1. Condit	hat someone else drives. If you lease a vehicle vans, trucks, tractors, sport utility vehicles of ses. Make: Hyundai Model: Veloster Year: 2015 Approximate mileage: 32445 Other information: tion: Very Good; NADA Value own or have more than one, describe here: Make: Model: Model:	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured clathe amount of any securer Creditors Who Have Clair. Current value of the entire property? \$9,525.00 Do not deduct secured clathe amount of any securer creditors Who Have Clair.	aims or exemptions. Put d claims on Schedule D: ins Secured by Property. Current value of the portion you own? \$ 9,525.00 aims or exemptions. Put d claims on Schedule D: ins Secured by Property.
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Model:	Currentirer Perty (see \$	rent value of the re property? ot deduct secured claimount of any secure iters Who Have Clair rent value of the re property?	Current value of portion you own saims or exemptions. d claims on Schedulins Secured by Properties of portion you own
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Make: Model: Year: Approximate mileage: Other information: Check if this is community prope instructions) Attercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles amples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcy No	Currentirer \$s, and accessories	mount of any secure itors Who Have Clair rent value of the re property?	d claims on Schedul ms Secured by Propo Current value of portion you ow
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Year: Approximate mileage: Other information: Check if this is community prope instructions) Attercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles amples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcy No	entir erty (see \$ s, and accessories	re property?	portion you ow
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Check if this is community proper instructions) Itercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles amples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motors, No	s, and accessories		\$
amples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorc	•		
Year: Other information: Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community prope instructions)	er entir	rent value of the re property?	Current value of portion you ow
ou own or have more than one, list here: Make: Who has an interest in the property? Model: Debtor 1 only	the ar	ot deduct secured cla mount of any secure itors Who Have Clair	d claims on <i>Śchedul</i>
Year: Debtor 2 only Debtor 1 and Debtor 2 only		rent value of the	
Others informations	ontir	re property?	portion you ow
Other information: At least one of the debtors and another.	er		

Part 3: Describe Your Personal and Household Items

Do	you own or have any le	egal or equitable interest in any of the following items?	Current value of the portion you own?
6.	Household goods and	furnishings	Do not deduct secured claims or exemptions.
	Examples: Major appliar No Yes. Describe	nces, furniture, linens, china, kitchenware Debtor just got married in February, 2019. Wife owns all household goods.	\$_0.00
7.	Electronics		
		and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music electronic devices including cell phones, cameras, media players, games PS4, PS4 Games, Desktop Computer, Laptop Computer, iPad Pro, iPod Nano, iPod, Bose Headphones, Garmin 735XT, Garmin Forerunner 620, Fitbit Ionic, Canon DSLR	\$_450.00
8.	Collectibles of value		
	stamp, coin,	I figurines; paintings, prints, or other artwork; books, pictures, or other art objects; or baseball card collections; other collections, memorabilia, collectibles	-
	✓ No ✓ Yes. Describe		\$ 0.00
_	Familian		
9.		and nobbles ographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes carpentry tools; musical instruments	
	□ No	Star Wars Costumes and Equipment	
	✓ Yes. Describe		\$_400.00
10	. Firearms		
		, shotguns, ammunition, and related equipment	
	No Yes. Describe	Diamond Back AR15, Surplus Mosin Nagant, HK VP40, Maverick Shotgun	\$_400.00
11	. Clothes		
		thes, furs, leather coats, designer wear, shoes, accessories	
	No	Clothing and shoes	1 000 00
	Yes. Describe		\$
12	. Jewelry		
12	•	velry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,	
	✓ No ✓ Yes. Describe		\$ <u>0.00</u>
13	Non-farm animals Examples: Dogs, cats, b	pirds, horses	1
	☑ No		
	Yes. Describe		\$0.00
14	Any other personal and	d household items you did not already list, including any health aids you did not list	· Ì
	✓ No ✓ Yes. Give specific information		\$_0.00
15		f all of your entries from Part 3, including any entries for pages you have attached umber here	\$2,250.00

Part 4: Describe Your Financial Assets

Do	you own or have any leg	al or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	Cash Examples: Money you hav	e in your wallet, in your home, in a safe deposit box, and on hand when you file your petition	
	Yes	Cash:	\$
	and other simila	ngs, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, ar institutions. If you have multiple accounts with the same institution, list each.	
	□ No ☑ Yes	Institution name:	
	17.1. Checking account:	SunTrust	\$ 193.00
	17.2. Checking account:	Navy Federal Credit Union	\$ 0.00
	17.3. Savings account:	SunTrust	\$2.00
	17.4. Savings account:	Navy Federal Credit Union	\$5.00
	17.5. Certificates of deposit:		
	17.6. Other financial account:	Wells Fargo	
	17.7. Other financial account:	Capital One	•
			Ψ
	Bonds, mutual funds, or p Examples: Bond funds, invo No Yes Institution or issuer name:	publicly traded stocks estment accounts with brokerage firms, money market accounts	\$
			\$ \$
	an LLC, partnership, and ☑ No ☐ Yes. Give specific information about them		\$
1	Name of entity:	% of ownership:	\$
-			¢
		%	Φ.

20. Government and corporate bonds and other negotiable and non-negotiable instrument	
Negotiable instruments include personal checks, cashiers' checks, promissory notes, and Non-negotiable instruments are those you cannot transfer to someone by signing or delive	money orders. ring them.
☑ No	
☐Yes. Give specific information about	
them	
Issuer name:	Φ.
	_
	<u> </u>
21. Retirement or pension accounts	
Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or othe	r pension or profit-sharing plans
☑ No	
Yes. List each account separately. Institution name: Type of account:	
401(k) or similar plan:	¢
Pension plan:	\$
IRA:	\$
Retirement account:	\$
Keogh:	
Additional account:	\$
22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use <i>Examples:</i> Agreements with landlords, prepaid rent, public utilities (electric, gas, water), te companies, or others	
✓ No	
Yes Institution name or individual:	
Electric:	\$
Gas:	
	 \$
Heating oil:	
Rental unit:	•
Prepaid rent:	
Telephone:	\$
Water:	\$
Rented furniture:	\$
Other:	<u> </u>
23. Annuities (A contract for a periodic payment of money to you, either for life or for a number	er of years)
V No	
Yes Issuer name and description:	
- 100 marito and description.	\$
	•
	Φ

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified sta	ate tuition program.	
26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).		
☑ No		
Yes Institution name and description. Separately file the records of any inter	ests.11 U.S.C. § 521(c	:):
		- \$
25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights of exercisable for your benefit	r powers	
☑ No		
Yes. Give specific information about them		\$0.00
mornation about them		Ψ
26. Patents, copyrights, trademarks, trade secrets, and other intellectual property		J
Examples: Internet domain names, websites, proceeds from royalties and licensing agreements		
☑ No		
Yes. Give specific		
information about them		\$ <u>0.00</u>
27. Licenses, franchises, and other general intangibles		
Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, profe	ssional licenses	
☑ No		
☐ Yes. Give specific		
information about them		\$0.00
		Ψ
Money or property owed to you?		Current value of the
Money or property owed to you?		Current value of the portion you own?
Money or property owed to you?		Current value of the
Money or property owed to you? 28. Tax refunds owed to you		Current value of the portion you own? Do not deduct secured
		Current value of the portion you own? Do not deduct secured
28. Tax refunds owed to you No	Fadasalı	Current value of the portion you own? Do not deduct secured claims or exemptions.
28. Tax refunds owed to you No Yes. Give specific information about them, including whether		Current value of the portion you own? Do not deduct secured claims or exemptions.
28. Tax refunds owed to you No Yes. Give specific information about them, including whether you already filed the returns	State:	Current value of the portion you own? Do not deduct secured claims or exemptions. \$ 0.00 \$ 0.00
28. Tax refunds owed to you No Yes. Give specific information about them, including whether	State:	Current value of the portion you own? Do not deduct secured claims or exemptions.
28. Tax refunds owed to you No Yes. Give specific information about them, including whether you already filed the returns	State:	Current value of the portion you own? Do not deduct secured claims or exemptions. \$ 0.00 \$ 0.00
28. Tax refunds owed to you No Yes. Give specific information about them, including whether you already filed the returns	State:	Current value of the portion you own? Do not deduct secured claims or exemptions. \$ 0.00 \$ 0.00
28. Tax refunds owed to you No Yes. Give specific information about them, including whether you already filed the returns and the tax years	State: Local:	Current value of the portion you own? Do not deduct secured claims or exemptions. \$ 0.00 \$ 0.00 \$ 0.00
28. Tax refunds owed to you No Yes. Give specific information about them, including whether you already filed the returns and the tax years	State: Local:	Current value of the portion you own? Do not deduct secured claims or exemptions. \$ 0.00 \$ 0.00 \$ 0.00
28. Tax refunds owed to you No Yes. Give specific information about them, including whether you already filed the returns and the tax years	State: Local: nent, property settleme	Current value of the portion you own? Do not deduct secured claims or exemptions. \$ 0.00 \$ 0.00 \$ 0.00
28. Tax refunds owed to you ✓ No — Yes. Give specific information about them, including whether you already filed the returns and the tax years	State: Local: nent, property settleme Alimony:	Current value of the portion you own? Do not deduct secured claims or exemptions. \$ 0.00 \$ 0.00 \$ 0.00
28. Tax refunds owed to you ✓ No — Yes. Give specific information about them, including whether you already filed the returns and the tax years	State: Local: nent, property settleme	Current value of the portion you own? Do not deduct secured claims or exemptions. \$ 0.00 \$ 0.00 \$ 0.00
28. Tax refunds owed to you ✓ No — Yes. Give specific information about them, including whether you already filed the returns and the tax years	State: Local: nent, property settleme Alimony:	Current value of the portion you own? Do not deduct secured claims or exemptions. \$ 0.00 \$ 0.00 \$ 0.00 ent \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00
28. Tax refunds owed to you ✓ No — Yes. Give specific information about them, including whether you already filed the returns and the tax years	State: Local: nent, property settleme Alimony: Maintenance:	Current value of the portion you own? Do not deduct secured claims or exemptions. \$\frac{0.00}{0.00}\$ ont \$\frac{0.00}{0.00}\$ ont \$\frac{0.00}{0.00}\$ ont \$\frac{0.00}{0.00}\$ \$\frac{0.00}{0.00}\$ \$\frac{0.00}{0.00}\$ \$\frac{0.00}{0.00}\$ \$\frac{0.00}{0.00}\$
28. Tax refunds owed to you ✓ No — Yes. Give specific information about them, including whether you already filed the returns and the tax years	State: Local: nent, property settleme Alimony: Maintenance: Support:	Current value of the portion you own? Do not deduct secured claims or exemptions. \$ 0.00 \$ 0.00 \$ 0.00 ent \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00
28. Tax refunds owed to you ✓ No ✓ Yes. Give specific information about them, including whether you already filed the returns and the tax years	State: Local: nent, property settleme Alimony: Maintenance: Support: Divorce settlement:	Current value of the portion you own? Do not deduct secured claims or exemptions. \$\frac{0.00}{0.00}\$ ont \$\frac{0.00}{0.00}\$ ont \$\frac{0.00}{0.00}\$ ont \$\frac{0.00}{0.00}\$ \$\frac{0.00}{0.00}\$ \$\frac{0.00}{0.00}\$ \$\frac{0.00}{0.00}\$ \$\frac{0.00}{0.00}\$
28. Tax refunds owed to you No Yes. Give specific information about them, including whether you already filed the returns and the tax years	State: Local: nent, property settleme Alimony: Maintenance: Support: Divorce settlement: Property settlement:	Current value of the portion you own? Do not deduct secured claims or exemptions. \$\frac{0.00}{0.00}\$ ont \$\frac{0.00}{0.00}\$ ont \$\frac{0.00}{0.00}\$ ont \$\frac{0.00}{0.00}\$ \$\frac{0.00}{0.00}\$ \$\frac{0.00}{0.00}\$ \$\frac{0.00}{0.00}\$ \$\frac{0.00}{0.00}\$
28. Tax refunds owed to you No	State: Local: nent, property settleme Alimony: Maintenance: Support: Divorce settlement: Property settlement:	Current value of the portion you own? Do not deduct secured claims or exemptions. \$\frac{0.00}{0.00}\$ ont \$\frac{0.00}{0.00}\$ ont \$\frac{0.00}{0.00}\$ ont \$\frac{0.00}{0.00}\$ \$\frac{0.00}{0.00}\$ \$\frac{0.00}{0.00}\$ \$\frac{0.00}{0.00}\$ \$\frac{0.00}{0.00}\$
28. Tax refunds owed to you ✓ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years	State: Local: nent, property settleme Alimony: Maintenance: Support: Divorce settlement: Property settlement:	Current value of the portion you own? Do not deduct secured claims or exemptions. \$\frac{0.00}{0.00}\$ ont \$\frac{0.00}{0.00}\$ ont \$\frac{0.00}{0.00}\$ ont \$\frac{0.00}{0.00}\$ \$\frac{0.00}{0.00}\$ \$\frac{0.00}{0.00}\$ \$\frac{0.00}{0.00}\$ \$\frac{0.00}{0.00}\$
28. Tax refunds owed to you No	State: Local: nent, property settleme Alimony: Maintenance: Support: Divorce settlement: Property settlement:	Current value of the portion you own? Do not deduct secured claims or exemptions. \$\frac{0.00}{0.00}\$ ont \$\frac{0.00}{0.00}\$ ont \$\frac{0.00}{0.00}\$ ont \$\frac{0.00}{0.00}\$ \$\frac{0.00}{0.00}\$ \$\frac{0.00}{0.00}\$ \$\frac{0.00}{0.00}\$ \$\frac{0.00}{0.00}\$

31	Interests in insurance policies Examples: Health, disability, or life insurance No	ee; health savings account (HSA)	; credit, homeowner's, or renter's insurance	
	Yes. Name the insurance company of each policy and list its value	Company name:	Beneficiary:	Surrender or refund value:
	or each policy and list its value			\$
				\$
				\$
32	property because someone has died.		nce policy, or are currently entitled to receive	
	☑ No			
	Yes. Give specific information			\$ <u>0.00</u>
33	Claims against third parties, whether or Examples: Accidents, employment disputed No	_]
	Yes. Describe each claim			\$0.00
34	Other contingent and unliquidated claim to set off claims	s of every nature, including co	unterclaims of the debtor and rights	
	Yes. Describe each claim			\$0.00
				\$
25	- Any financial assets you did not already.	liet		_'
33	No	list		_
	Yes. Give specific information			<u>\$</u> 0.00
36	Add the dollar value of all of your entries for Part 4. Write that number here	, ,		\$1,602.73
Pa	ort 5: Describe Any Business-F	Related Property You Ow	vn or Have an Interest In. List any re	eal estate in Part 1.
37	Do you own or have any legal or equitab ✓ No. Go to Part 6. ✓ Yes. Go to line 38.	le interest in any business-rela	ited property?	
				Current value of the portion you own? Do not deduct secured claims or exemptions.
38	Accounts receivable or commissions yo	u already earned		
	☐ No☐ Yes. Describe			1
	103. D030HDG			\$
39	Office equipment, furnishings, and supprocesses Business-related computers, software No		ines, rugs, telephones, desks, chairs, electronic devices	
	Yes. Describe			\$

40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade					
☐ No ☐ Yes. Describe	\$				
41. Inventory					
☐ No ☐ Yes. Describe	\$				
42. Interests in partnerships or joint ventures No					
Yes. Describe Name of entity: % of owners					
	\$ \$ \$				
43. Customer lists, mailing lists, or other compilations					
 No Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? 					
Yes. Describe	\$				
44. Any business-related property you did not already list					
Yes. Give specific information	_ \$				
	_ \$ _ \$				
45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached	\$ \$0.00				
for Part 5. Write that number here	→				
Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1.					
46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. Yes. Go to line 47.					
	Current value of the portion you own? Do not deduct secured claims or exemptions.				
47. Farm animals Examples: Livestock, poultry, farm-raised fish □ No					
☐ Yes	\$				

48. Crops—either growing or harvested			
☐ Yes. Give specific information			\$
49. Farm and fishing equipment, implements, machinery, fixtures, No Yes	and tools of trade		7
			\$
50. Farm and fishing supplies, chemicals, and feed			
Yes			\$
51. Any farm- and commercial fishing-related property you did not	t already list		
Yes. Give specific information			\$
52. Add the dollar value of all of your entries from Part 6, includin for Part 6. Write that number here			\$_0.00
Part 7: Describe All Property You Own or Have a	n Interest in That	You Did Not List Above	
53. Do you have other property of any kind you did not already lise Examples: Season tickets, country club membership No Yes. Give specific information	rt?		
54. Add the dollar value of all of your entries from Part 7. Write that	at number here		<u>\$0.00</u>
Part 8: List the Totals of Each Part of this Form			
55. Part 1: Total real estate, line 2		→	\$ <u>0.00</u>
56. Part 2: Total vehicles, line 5	\$ 9,525.00	_	
57. Part 3: Total personal and household items, line 15	\$ <u>2,250.00</u>	_	
58. Part 4: Total financial assets, line 36	_{\$_1,602.73}	_	
59. Part 5: Total business-related property, line 45	\$ <u>0.00</u>	_	
60. Part 6: Total farm- and fishing-related property, line 52	\$_0.00	_	
61. Part 7: Total other property not listed, line 54	+ \$\\\0.00	_	
62. Total personal property. Add lines 56 through 61	\$_13,377.73	Copy personal property total	≠ \$_13,377.73
63. Total of all property on Schedule A/B. Add line 55 + line 62			\$_13,377.73

Fill in this information to identify your case:			
Debtor 1	James Leroy Sep	hton Jr	
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States I	Bankruptcy Court fo	r the: Middle District of Florida	
Case number			
(If known)			

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt								
 Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. ✓ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) ✓ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) 								
2. For any property you list on <i>Schedule A/B</i> that you claim as exempt, fill in the information below.								
the state of the s	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption					
	Copy the value from Schedule A/B	Check only one box for each exemption						
Electronics - PS4, PS4 Games, Desktop Com Brief Laptop Computer, iPad Pro, iPod Nano, iPod description: Headphones, Garmin 735XT, Garmin Forerun 620, Fitbit Ionic, Canon DSLR Line from Schedule A/B: 7	. Bose 450 00	\$\frac{450.00}{100\% of fair market value, up to any applicable statutory limit	In re Hawkins, 51 B.R. 348 (S.D. Fla. 1985) Fla. Const. Art.10, § 4					
Sports and hobby equipment - Star Wars Cos Brief and Equipment description: Line from Schedule A/B: 9	\$_400.00	_ \$\ 300.00 \[\begin{align*}	Fla. Stat. Ann. § 222.25					
Brief Sports and hobby equipment - Star Wars Cos and Equipment Line from Schedule A/B: 9	\$_400.00	\$ 150.00 100% of fair market value, up to any applicable statutory limit	In re Hawkins, 51 B.R. 348 (S.D. Fla. 1985) Fla. Const. Art.10, § 4					
 3. Are you claiming a homestead exemption of (Subject to adjustment on 4/01/22 and every 3 y ✓ No ✓ Yes. Did you acquire the property covered b ✓ No ✓ Yes 	ears after that for cases filed	,						

Debtor

Additional Page

			-	Amount of the	
		tion of the property and line A/B that lists this property	Current value of the portion you own	exemption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B	Check only one box for each exemption	
Brief descr		s - Diamond Back AR15, Surplus Mosin Nagant, 0, Maverick Shotgun	\$ <u>400.00</u>	\$ 400.00 100% of fair market value, up to	In re Hawkins, 51 B.R. 348 (S.D. Fla. 1985) Fla. Const. Art.10, § 4
Line f		10		any applicable statutory limit	
Brief descr	Clothing iption: rom	g - Clothing and shoes	\$ <u>1,000.00</u>	\$\frac{1,000.00}{100\% of fair market value, up to any applicable statutory limit	Fla. Stat. Ann. § 222.25
Scheen Brief		11 st (Checking)			Fla. Stat. Ann. § 222.25
	iption: rom		\$193.00	\$ 193.00 100% of fair market value, up to any applicable statutory limit)
		17.1 st (Savings)			Fla. Stat. Ann. § 222.25
Brief descr	iption:		\$ <u>2.00</u>	\$ 2.00	
Line f		17.3		100% of fair market value, up to any applicable statutory limit	
Brief		ederal Credit Union (Savings)	\$ <u>5.00</u>	\$ 5.00	Fla. Stat. Ann. § 222.25
Line f		17.4		100% of fair market value, up to any applicable statutory limit	
Brief		argo (Checking)	\$1,400.00	F 1,400.00	Fla. Stat. Ann. § 222.25
descr Line f	iption:		\$_1,400.00	1,400.00 100% of fair market value, up to any applicable statutory limit)
Sche	dule A/B:	17.6 One (Checking)			Fla. Stat. Ann. § 222.25
Brief descr	iption:		\$ <u>2.73</u>	\$ 2.73	
Line f		17.7		100% of fair market value, up to any applicable statutory limit)
Brief descr	iption:		\$	\$100% of fair market value, up to	,
Line f	rom dule A/B:			any applicable statutory limit	
Brief descr	iption:		\$	\$100% of fair market value, up to	
Line f	rom dule A/B:			any applicable statutory limit	
Brief descr	iption:		\$	\$100% of fair market value, up to	
Line f	rom dule A/B:			any applicable statutory limit	
Brief descr	iption:		\$	\$ 100% of fair market value, up to any applicable statutory limit	
Line f	rom dule A/B:			- y - ee	
Brief descr	iption:		\$	\$100% of fair market value, up to	
Line f	rom dule A/B:			any applicable statutory limit	

Fill in this information to identify your cas	e:			
James Leroy Sephton Jr				
Debtor 1 First Name Middle N	ame Last Name			
Debtor 2 (Spouse, if filing) First Name Middle N	ame Last Name			
United States Bankruptcy Court for the: Middle Dist	rict of Florida			
Case number			_	
(If known)				f this is an
Be as complete and accurate as possible.	s Who Have Claims Secure	ually responsible fo	or supplying correct	12/15
additional pages, write your name and cas	y the Additional Page, fill it out, number the entries, se number (if known).	and attach it to this	form. On the top of	any
Do any creditors have claims secured b	y your property?			
	n to the court with your other schedules. You have nothi	ng else to report on t	his form.	
✓ Yes. Fill in all of the information below.		ng cled to report on t		
Part 1: List All Secured Claims				
2 List all secured claims If a creditor has n	nore than one secured claim, list the creditor separately	Column A	Column B	Column C
	as a particular claim, list the other creditors in Part 2.	Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
As much as possible, list the claims in alph	abetical order according to the creditor's name.	value of collateral.	claim	If any
2.1 CarMax Auto Finance	Describe the property that secures the claim:	\$ 14,630.48	\$ 9,525.00	\$ 5,105.48
		φ_1+,000.+0	φ_0,020.00	φ <u>0,100.40</u>
Creditor's Name	2015 Hyundai Veloster - \$9,525.00			
225 Chastain Meadows Ct				
Number Street				
	As of the date you file, the claim is: Check all that apply.			
Kennesaw GA 30144	Contingent			
City State ZIP Code	Unliquidated			
Who owes the debt? Check one.	☐ Disputed			
Debtor 1 only Debtor 2 only	Nature of lien. Check all that apply.			
Debtor 1 and Debtor 2 only	An agreement you made (such as mortgage or secured car loan)			
At least one of the debtors and another	Statutory lien (such as tax lien, mechanic's lien)			
☐ Check if this claim relates to a	☐ Judgment lien from a lawsuit			
community debt	Other (including a right to offset)	-		
Date debt was incurred	Last 4 digits of account number			
	Describe the property that secures the claim:	\$	\$	\$
Creditor's Name				
Number Street				
	As of the date you file, the claim is: Check all that apply.			
	Contingent			
City State ZIP Code	Unliquidated			
Who owes the debt? Check one.	Disputed			
Debtor 1 only Debtor 2 only	Nature of lien. Check all that apply.			
Debtor 2 only Debtor 1 and Debtor 2 only	An agreement you made (such as mortgage or secured			
At least one of the debtors and another	car loan) Statutory lien (such as tax lien, mechanic's lien)			
☐ Check if this claim relates to a	Judgment lien from a lawsuit			
community debt	Other (including a right to offset)	_		
Date debt was incurred	Last 4 digits of account number	1	ī	
Add the dollar value of your entries in	Column A on this page. Write that number here:	\$ <u>14,630.48</u>		

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Debtor 1 James Leroy Sephton Jr

First Name	Middle Name	Last Name	

Case number (if known)_____

Pa	Part 2: List Others to Be Notified for a Debt That You Already Listed							
ag yo	ency is trying to collect from you for a deb	t you owe to so ne debts that yo	omeone else, list the co ou listed in Part 1, list t	ebt that you already listed in Part 1. For example, if a collection reditor in Part 1, and then list the collection agency here. Similarly, if the additional creditors here. If you do not have additional persons to				
				On which line in Part 1 did you enter the creditor?				
	Mana			Last 4 digits of account number				
	Name							
	Street							
	City	State	ZIP Code					
				On which line in Part 1 did you enter the creditor?				
	Name			Last 4 digits of account number				
	Name							
	Street							
	City	State	ZIP Code					
				On which line in Part 1 did you enter the creditor?				
	Name			Last 4 digits of account number				
	Street							
	City	State	ZIP Code					
				On which line in Part 1 did you enter the creditor?				
	Name			Last 4 digits of account number				
	Street							
Н	City	State	ZIP Code					
				On which line in Part 1 did you enter the creditor?				
	Name			Last 4 digits of account number				
	Street							
	City	State	7ID Codo					
	City	State	ZIP Code	On which line in Part 1 did you enter the creditor?				
				Last 4 digits of account number				
	Name			East 7 digits of account number				
	Chrock		<u>-</u>					
	Street							
	City	State	ZIP Code					

		Case	3:19-bk-02978	8-JAF	Doc 1	Filed 0	8/02/19	Page	e 24 of 86	6	
Fil	l in this in	formation to ident	ify your case:								
		James Leroy Sephto	ın Jr								
De	btor 1 _	First Name	Middle Name		Last Name						
	btor 2										
(Sp	ouse, if filing)	First Name	Middle Name		Last Name						
Un	ited States E	Bankruptcy Court for th	ne: Middle District of Flo	rida							
Ca	se number										k if this is an ded filing
(If	known)									amen	lueu illing
∩f	ficial F	orm 106E/	F								
											
Sc	hedu	ile E/F: Ci	reditors W	ho H	ave Ur	nsecu	ired Cl	aim	S		12/15
List A/B cred need any	the other : Property litors with ded, copy additiona	party to any execu (Official Form 106 partially secured the Part you need I pages, write your	possible. Use Part utory contracts or un (A/B) and on <i>Schedu</i> claims that are listed fill it out, number to r name and case nur	nexpired <i>ile G: Exe</i> d in <i>Sche</i> he entries mber (if k	leases that co ecutory Contr edule D: Cred s in the boxes nown).	ould result racts and U itors Who	in a claim. <i>I</i> Inexpired Lea Have Claims	Also list ases (Of Secured	executory co ficial Form 1 of by Property	ontracts on <i>Sc</i> 06G). Do not i . If more spac	chedule nclude any e is
[Do any cre ☑ No. Go ☑ Yes.	•	ty unsecured claims	against	you?						
2. (2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.										
((For an exp	planation of each type	pe of claim, see the ir	structions	s for this form	in the instru	iction booklet.	·	Total claim	Priority	Nonpriority
									Total Claim	amount	amount
2.1								e		\$	¢
	Priority Cred	litor's Name		Last 4 d	ligits of accou	nt number		Φ.		Φ	Φ
	. ,			When w	as the debt in	curred?					
	Number	Street		A = = £ 4b	a data waw fila	. Also sleius	ia. Obsals all th	_4			
				Conf	e date you file	e, uie ciaiiii	is. Check all th	ат арргу.			
	City	S	tate ZIP Code	Unlic	•						
	Who incu	rred the debt? Chec	ck one.	Disp							
	Debtor				PRIORITY u		claim:				
	Debtor	· 2 only · 1 and Debtor 2 only			estic support ob						
	_	it one of the debtors an	nd another		es and certain ot	-	_				
	_	c if this claim is for a			ns for death or p	personal injur	y while you were	е			
			•	_	er. Specify						
	Is the cia	im subject to offset	. ?								
	Yes										
2.2				Last 4 d	ligits of accou	nt number		\$	i	\$	\$
	Priority Cree	ditor's Name		When w	as the debt in	curred?		-			
	Number	Street		_	e date you file	, the claim	is: Check all the	at apply.			
					tingent						
	City		State ZIP Code	Disp	quidated						
	₩ho inc	urred the debt? Che	ck one.								
	L Debtor	r 1 only			PRIORITY u		claim:				
	_	r 2 only r 1 and Debtor 2 only			estic support ob	ŭ					
	_	st one of the debtors ar	nd another		es and certain ot	=	=				
	_	k if this claim is for			ns for death or p cicated	personal injur	y while you were	е			
			-	_	er. Specify						
	Is the cla	im subject to offset	ır		-						
	Yes										

Deb	otor 1	James Ler	OCSSO TO SIL9-L	ok-029		E_1 Filed 08/02/19 F	age 25 of 86	
Pa	rt 2:	1			secured Claims			
3.		o. You have not			claims against you	? e court with your other schedules.		
	nonpri include	ority unsecured ed in Part 1. If r	I claim, list the cred	ditor separ ditor holds	rately for each claim	order of the creditor who holds e For each claim listed, identify wh ist the other creditors in Part 3.If yo	at type of claim it is. Do not	list claims already
	Ame	ex						Total claim
1.1]					Last 4 digits of account number	-34999*****48983	_{\$} 0.00
		riority Creditor's Nan Box 297871 per Street	ne			When was the debt incurred?	2012	V
						As of the date you file, the claim	is: Check all that apply.	
	Who Do Do A	check if this clai e claim subject	or 2 only debtors and another im is for a commur	State State	ZIP Code	Contingent Unliquidated Disputed Type of NONPRIORITY unsect Student loans Obligations arising out of a separ that you did not report as priority Debts to pension or profit-sharing Other. Specify	ration agreement or divorce claims	
1.2		k Of America				Last 4 digits of account number When was the debt incurred?	431307*****7128 2013	\$ <u>0.00</u>
	EI P. City Who D D A Is the	incurred the dependent of a solution of a solution of a solution of the check if this class of the claim subject to solution of the	or 2 only debtors and another im is for a commu	TX State	79998 ZIP Code	As of the date you file, the claim Contingent Unliquidated Disputed Type of NONPRIORITY unsecu Student loans Obligations arising out of a separ that you did not report as priority Debts to pension or profit-sharing Other. Specify	red claim: ration agreement or divorce claims	
4.3	<u> </u>	k of America	20			Last 4 digits of account number	03/06/2012	\$ <u>12,535.00</u>

Check if this claim is for a community debt	☑ Other. Specify			
Is the claim subject to offset?				
✓ No				
Yes				
Bank of America	Last 4 digits of account number \$12,535.00			
Nonpriority Creditor's Name	When was the debt incurred? 03/06/2012			
4060 Ogletown / Stanton Rd				
Number Street DE5-019-03-07	As of the date you file, the claim is: Check all that apply.			
Newark DE 19713	□ Contingent			
City State ZIP Code Who incurred the debt? Check one.	Unliquidated			
Debtor 1 only	☐ Disputed			
Debtor 2 only	Type of NONPRIORITY unsecured claim:			
Debtor 1 and Debtor 2 only	☐ Student loans			
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce			
☐ Check if this claim is for a community debt	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts			
Is the claim subject to offset?	Other. Specify Credit Card Debt			

✓ No Yes

Is the claim subject to offset?

rt 9.	Lict	All of	Valle	NONPRIORITY	Uncogurad	Claim
rt 2	LIST	AII OI	Your	NUNPRIURITY	unsecurea	Claims

3.	Do any creditors have nonpriority unsecured claims against you No. You have nothing to report in this part. Submit this form to the Yes	
4.	nonpriority unsecured claim, list the creditor separately for each claim	order of the creditor who holds each claim. If a creditor has more than one not not listed, identify what type of claim it is. Do not list claims already ist the other creditors in Part 3.If you have more than three nonpriority unsecured
		Total claim
4.4	Barclays Bank Delaware	
4.4	Nonpriority Creditor's Name	Last 4 digits of account number 000208***** \$ 0.00
	Po Box 8803	When was the debt incurred? 2013
	Number Street	<u> </u>
	Number Street	
		As of the date you file, the claim is: Check all that apply.
	Wilmington DE 19899	Continuent
	City State ZIP Code	☐ Contingent ☐ Unliquidated
	Who incurred the debt? Check one.	☐ Disputed
	Debtor 1 only	Type of NONPRIORITY unsecured claim:
	Debtor 2 only	Student loans
	Debtor 1 and Debtor 2 only	☐ Obligations arising out of a separation agreement or divorce
	At least one of the debtors and another	that you did not report as priority claims
	☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts
	Is the claim subject to offset?	✓ Other. Specify
	✓ No	
	Yes	
4.5	Bby/Cbna	Last 4 digits of account number 603535*****3432 \$0.00
	Negociacity Conditions Negocia	When was the debt incurred? 2015
	Nonpriority Creditor's Name Po Box 6497	
	Number Street	A 50 14 51 4 11 1 01 1 1 1 1
		As of the date you file, the claim is: Check all that apply.
	Sioux Falls SD 57117	Contingent
	City State ZIP Code	Unliquidated
	Who incurred the debt? Check one. Debtor 1 only	Disputed
	Debtor 2 only	Type of NONPRIORITY unsecured claim:
	Debtor 1 and Debtor 2 only	Student loans
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims
	☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts
	·	✓ Other. Specify
	Is the claim subject to offset? No	
	Yes	
4.6	Bk Of Amer	Last 4 digits of account number 426428*****9297
] BK Of Affier	\$12,000.00
	Nonpriority Creditor's Name	When was the debt incurred? 2012
	400 Christiana Rd	
	Number Street	As of the date you file, the claim is: Check all that apply.
	Newark DE 19713	·
	City State ZIP Code	☐ Contingent☐ Unliquidated
	Who incurred the debt? Check one.	☐ Unilquidated ☐ Disputed
	Debtor 1 only	•
	Debtor 2 only	Type of NONPRIORITY unsecured claim:
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Student loans Obligations origing out of a congration agreement or diverse.
	_	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
	☐ Check if this claim is for a community debt	☐ Debts to pension or profit-sharing plans, and other similar debts
	Is the claim subject to offset?	✓ Other. Specify
	No	
	Yes	

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Part 2:	List All of Your NONPRIORITY	Unsecured	Claims
I all Z.	Eist Air or rour North Informati	Oliseculeu	Ola IIII.

	Do any creditors have nonpriority unsecured on No. You have nothing to report in this part. Sure Yes				
	List all of your nonpriority unsecured claims in nonpriority unsecured claim, list the creditor separ included in Part 1. If more than one creditor holds claims fill out the Continuation Page of Part 2.	ately for each clain	n. For each claim listed, identify wh	at type of claim it is. Do not	list claims already
					Total claim
4.7	Bk Of Amer		l 4 dinita af	205122046	
	Nonpriority Creditor's Name		Last 4 digits of account number	203122940	\$ <u>0.00</u>
	4909 Savarese Cir		When was the debt incurred?	2009	
	Number Street				
	Tampa FL	33634	As of the date you file, the claim	is: Check all that apply.	
	City State	ZIP Code	Contingent		
	Who incurred the debt? Check one.		Unliquidated		
	Debtor 1 only		Disputed		
	Debtor 2 only		Type of NONPRIORITY unsecu	ired claim:	
	Debtor 1 and Debtor 2 only		Student loans		
	At least one of the debtors and another		Obligations arising out of a separe that you did not report as priority		
	☐ Check if this claim is for a community debt		Debts to pension or profit-sharing		
	•		Other. Specify		
	Is the claim subject to offset?				
	Yes				
4.8	Brclysbankde		Last 4 digits of account number	000157****	\$ 0.00
1.0	•		When was the debt incurred?	2012	Ψ <u>σισσ</u>
	Nonpriority Creditor's Name		When was the dest incurred:	2012	
	Po Box 26182 Number Street				
	Number Street		As of the date you file, the claim	is: Check all that apply.	
	Wilmington DE	19899	Contingent		
	City State	ZIP Code	☐ Unliquidated		
	Who incurred the debt? Check one.		☐ Disputed		
	☑ Debtor 1 only ☐ Debtor 2 only		Type of NONPRIORITY unsecu	ıred claim:	
	Debtor 1 and Debtor 2 only		☐ Student loans		
	At least one of the debtors and another		Obligations arising out of a separ		
			that you did not report as priority Debts to pension or profit-sharing		
	☐ Check if this claim is for a community debt		✓ Other. Specify	g plane, and other omiliar dobto	
	Is the claim subject to offset?				
	✓ No ✓ Yes				
4.9	Cap One		Last 4 digits of account number	526835*****	
	•				\$ <u>0.00</u>
	Nonpriority Creditor's Name		When was the debt incurred?	2011	
	26525 N Riverwoods Blvd				
	Number Street		As of the date you file, the claim	is: Check all that apply.	
	Mettawa IL	60045	Contingent		
	City State	ZIP Code	Unliquidated		
	Who incurred the debt? Check one. Debtor 1 only		☐ Disputed		
	Debtor 1 only Debtor 2 only		Type of NONPRIORITY unsecu	red claim:	
	Debtor 1 and Debtor 2 only		Student loans		
	At least one of the debtors and another		Obligations arising out of a separ	ation agreement or divorce	
			that you did not report as priority	claims	
	☐ Check if this claim is for a community debt		Debts to pension or profit-sharing	g plans, and other similar debts	
	Is the claim subject to offset?		Other. Specify		
	✓ No				
	Yes				

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2:	List All of	Your N	ONPRIORITY	Unsecured	Claims

	Do any creditors have nonpriority unsecured on the No. You have nothing to report in this part. Sure Yes	= -			
i	List all of your nonpriority unsecured claims in nonpriority unsecured claim, list the creditor separ included in Part 1. If more than one creditor holds claims fill out the Continuation Page of Part 2.	ately for each clain	 For each claim listed, identify what 	it type of claim it is. Do not	list claims already
					Total claim
4.10	Capital One			0/11	
	Nonpriority Creditor's Name		Last 4 digits of account number	9411	_{\$} 1,869.00
	P.O. Box 85015		When was the debt incurred?	03/13/2015	
	Number Street				
	Richmond VA	23285-5075	As of the date you file, the claim	is: Check all that apply.	
	City State	ZIP Code	☐ Contingent		
	Who incurred the debt? Check one.		Unliquidated		
	Debtor 1 only		☐ Disputed		
	Debtor 2 only		Type of NONPRIORITY unsecu	red claim:	
	Debtor 1 and Debtor 2 only		Student loans		
	At least one of the debtors and another		Obligations arising out of a separathat you did not report as priority of	ation agreement or divorce	
	☐ Check if this claim is for a community debt		☐ Debts to pension or profit-sharing	plans, and other similar debts	
	•		Other. Specify Credit Card Del	bt	
	Is the claim subject to offset?				
	Yes				
4.11	Capital One Bank Usa N		Last 4 digits of account number	517805*****	\$ 0.00
				2010	Ψ_0.00
	Nonpriority Creditor's Name 15000 Capital One Dr		Tillon Nuc the dest meaned.	2010	
	Number Street				
	Trumber Street		As of the date you file, the claim	is: Check all that apply.	
	Richmond VA	23238	Contingent		
	City State	ZIP Code	☐ Unliquidated		
	Who incurred the debt? Check one. Debtor 1 only		☐ Disputed		
	Debtor 2 only		Type of NONPRIORITY unsecu	red claim:	
	Debtor 1 and Debtor 2 only		Student loans		
	☐ At least one of the debtors and another		Obligations arising out of a separathat you did not report as priority of		
	☐ Check if this claim is for a community debt		Debts to pension or profit-sharing		
	•		✓ Other. Specify	, , , , , , , , , , , , , , , , , , , ,	
	Is the claim subject to offset?				
	Yes				
4.12	Carmax Auto Finance		Last 4 digits of account number	30135356	
				2018	\$ <u>14,562.00</u>
	Nonpriority Creditor's Name		When was the debt incurred?	2010	
	12800 Tuckahoe Creek Pkw Number Street				
	Number Street		As of the date you file, the claim	is: Check all that apply.	
	Richmond VA	23238	Contingent		
	City State Who incurred the debt? Check one.	ZIP Code	Unliquidated		
	Debtor 1 only		Disputed		
	Debtor 2 only		Type of NONPRIORITY unsecu	red claim:	
	Debtor 1 and Debtor 2 only		☐ Student loans		
	At least one of the debtors and another		Obligations arising out of a separa		
	☐ Check if this claim is for a community debt		that you did not report as priority of		
	•		□ Debts to pension or profit-sharing☑ Other. Specify	plans, and other similar debts	
	Is the claim subject to offset?		Culer. Specify		
	Yes				
	50				

Part

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2:	List All of	Your NON	PRIORITY	Unsecured	Claims

3.	Do any creditors have nonpriority unsecured on the No. You have nothing to report in this part. Sure Yes	= -			
4.	List all of your nonpriority unsecured claims in nonpriority unsecured claim, list the creditor separ included in Part 1. If more than one creditor holds claims fill out the Continuation Page of Part 2.	ately for each clair	n. For each claim listed, identify what type	e of claim it is. Do not I	ist claims already
					Total claim
4.13	1		Last 4 digits of account number 2126	646**	_{\$} 2,258.00
	Nonpriority Creditor's Name Po Box 27288		When was the debt incurred? 2019	\$	§ 2,236.00
	Number Street				
	Tempe AZ	85285	As of the date you file, the claim is: Ch	neck all that apply.	
	City State	ZIP Code	Contingent		
	Who incurred the debt? Check one.		☐ Unliquidated ☐ Disputed		
	Debtor 1 only		Type of NONPRIORITY unsecured cl	:laim:	
	Debtor 2 only		☐ Student loans		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another		☐ Obligations arising out of a separation ag		
	At least one of the deptors and another		that you did not report as priority claims Debts to pension or profit-sharing plans,		
	☐ Check if this claim is for a community debt		 Debts to pension or profit-straining plans, Other. Specify 	s, and other similar debts	
	Is the claim subject to offset?		_ calcar opean,		
	✓ No				
1 1 1	☐ Yes Citi			C1C*****	§ 0.00
4.14	- Citi		Last 4 digits of account number 5466 When was the debt incurred? 2011		δ <u>0.00</u>
	Nonpriority Creditor's Name		when was the debt incurred?	<u> </u>	
	Po Box 6217 Number Street				
	Number Street		As of the date you file, the claim is: Ch	neck all that apply.	
	Sioux Falls SD	57117	Contingent		
	City State	ZIP Code	Unliquidated		
	Who incurred the debt? Check one. Debtor 1 only		☐ Disputed		
	Debtor 2 only		Type of NONPRIORITY unsecured cl	claim:	
	Debtor 1 and Debtor 2 only		Student loans		
	At least one of the debtors and another		Obligations arising out of a separation at that you did not report as priority claims	•	
	☐ Check if this claim is for a community debt		Debts to pension or profit-sharing plans,	s, and other similar debts	
	Is the claim subject to offset?		Other. Specify		
	✓ No				
	Yes				
4.15	Citi Shell		Last 4 digits of account number 2555	514*	\$0.00
	Nonpriority Creditor's Name		When was the debt incurred? 2010	0	Ψ
	Po Box 6497				
	Number Street		As of the date you file, the claim is: Ch	neck all that apply.	
	Sioux Falls SD	57117	Contingent	, , , , , , ,	
	City State	ZIP Code	☐ Unliquidated		
	Who incurred the debt? Check one. Debtor 1 only		Disputed		
	Debtor 2 only		Type of NONPRIORITY unsecured c	claim:	
	Debtor 1 and Debtor 2 only		Student loans		
	At least one of the debtors and another		Obligations arising out of a separation a		
	☐ Check if this claim is for a community debt		that you did not report as priority claims Debts to pension or profit-sharing plans,		
	Is the claim subject to offset?		Other. Specify	o, and other similar ucuts	
	No				
	Yes				

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Lict All of V	OUR NONDDI	ODITY IInco	oured Claims

3.	Do any creditors have nonpriority unsecured claims against y No. You have nothing to report in this part. Submit this form to Yes		
4.	nonpriority unsecured claim, list the creditor separately for each cl	cal order of the creditor who holds each claim. If a creditor has more tha laim. For each claim listed, identify what type of claim it is. Do not list claims m, list the other creditors in Part 3.If you have more than three nonpriority u	s already
		Total cl	laim
4.16	CitiBank CBNA		
	Nonpriority Creditor's Name	Last 4 digits of account number \$8,160.	.00
	701 E 60th St N	When was the debt incurred?	
	Number Street		
	Sioux Falls SD 57104	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	─ ☐ Contingent	
		Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	☐ Debtor 1 only ☐ Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this plains in fau a community dabt	Debts to pension or profit-sharing plans, and other similar debts	
	LI Check if this claim is for a community debt	Other. Specify Credit Card Debt	
	Is the claim subject to offset?		
	✓ No ☐ Yes		
4.17		Last 4 digits of account number 585637***** \$0.00	
4.17		Last 4 digits of account number 585637***** \$0.00 — When was the debt incurred? 2011	
	Nonpriority Creditor's Name	— When was the debt incurred? <u>2011</u>	
	Po Box 182789 Number Street	_	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	Columbus OH 43218	Contingent	
	City State ZIP Code	Unliquidated	
	Who incurred the debt? Check one.	☐ Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Student loans	
	At least one of the debtors and another	☐ Obligations arising out of a separation agreement or divorce	
		that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	☐ Check if this claim is for a community debt	U Other. Specify	
	Is the claim subject to offset?		
	V No □		
4.18	Yes	601140*****	
7.10	Discover Fin Svcs Llc	Last 4 digits of account number 601149***** \$9,420.	.00
	Nonpriority Creditor's Name	When was the debt incurred? 2012	
	Po Box 15316		
	Number Street	As of the date you file, the claim is: Check all that apply.	
	Wilmington DE 19850	— _ , , , , , , , , , , , , , , , , ,	
	City State ZIP Code		
	Who incurred the debt? Check one.	☐ Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
	_	that you did not report as priority claims	
	☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	✓ Other. Specify	
	✓ No		
	Yes		

art 2:	List All of Your I	NONPRIORITY	Unsecured Claims

3.	Do any creditors have nonpriority unsecured claims against y No. You have nothing to report in this part. Submit this form to Yes		
	nonpriority unsecured claim, list the creditor separately for each cla	al order of the creditor who holds each claim. If a creditor has more than on aim. For each claim listed, identify what type of claim it is. Do not list claims alren, list the other creditors in Part 3.If you have more than three nonpriority unsec	eady
		Total claim	
4.19	Discoverbank		
4.13		Last 4 digits of account number 601120******	
	Nonpriority Creditor's Name	When was the debt incurred? 2012	
	Pob 15316	— When was the debt incurred:	
	Number Street		
	-	As of the date you file, the claim is: Check all that apply.	
	Wilmington DE 19850	As of the date you me, the claim is. Oneok an that apply.	
	City State ZIP Code	─ Contingent	
	Who incurred the debt? Check one.	☐ Unliquidated	
		☐ Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	☐ Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce	
	At least one of the debtors and another	that you did not report as priority claims	
	☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	·	✓ Other. Specify	
	Is the claim subject to offset?		
	✓ No		
	Yes	0.00	
4.20	Dsnb Macys	Last 4 digits of account number 433971***** \$\frac{0.00}{}	
	Nonpriority Creditor's Name	— When was the debt incurred? <u>2014</u>	
	Number Street	_	
		As of the date you file, the claim is: Check all that apply.	
		Contingent	
	City State ZIP Code	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	✓ Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only		
	At least one of the debtors and another	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	•	✓ Other. Specify	
	Is the claim subject to offset?	, ,	
	∠ No		
	Yes		
4.21	Esb/Harley Davidson Cr	Last 4 digits of account number 20090114214479	
	Nonpriority Creditor's Name	When was the debt incurred? 2009	
	·	Then was the dest mounted.	
	Po Box 21829	_	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	Corson City NV 90701	<u> </u>	
	Carson City NV 89721 City State ZIP Code	Contingent	
	Who incurred the debt? Check one.	Unliquidated	
	✓ Debtor 1 only	Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	☐ Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
	Observation also to the control of t	that you did not report as priority claims	
	☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	✓ Other. Specify	
	✓ No		
	Yes		

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ე.	Liet All of	VALLE NAME	DIORITY line	acured Claime

3.	Do any creditors have nonpriority unsecured on No. You have nothing to report in this part. Sure Yes				
4.	List all of your nonpriority unsecured claims in nonpriority unsecured claim, list the creditor sepaincluded in Part 1. If more than one creditor holds claims fill out the Continuation Page of Part 2.	rately for each claim	. For each claim listed, identify wh	at type of claim it is. Do not	list claims already
					Total claim
4.22			Last 4 digits of account number		_{\$} 41,670.00
	Nonpriority Creditor's Name P.O. Box 542000		When was the debt incurred?	10/19/2017	\$41,070.00
	Number Street				
			As of the date you file, the claim	ie: Check all that apply	
	Omaha NE	68154	_	п ъ. Спеск ан тнасаррту.	
	City State	ZIP Code	☐ Contingent☐ Unliquidated		
	Who incurred the debt? Check one.		Disputed		
	Debtor 1 only		Type of NONPRIORITY unsecu	ıred claim:	
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only		☐ Student loans		
	At least one of the debtors and another		Obligations arising out of a separ that you did not report as priority	ration agreement or divorce	
	☐ Check if this claim is for a community debt		☐ Debts to pension or profit-sharing	g plans, and other similar debts	
	•		Other. Specify Credit Card De	ebt	
	Is the claim subject to offset?				
	Yes				
4.23	Ford Motor Credit Comp		Last 4 digits of account number	55542667	\$0.00
	Nonpriority Creditor's Name		When was the debt incurred?	2017	
	Po Box Box 542000				
	Number Street		As of the date you file, the claim	is: Check all that apply.	
			☐ Contingent		
	Omaha NE City State	68154 ZIP Code	Unliquidated		
	Who incurred the debt? Check one.	211 0000	Disputed		
	✓ Debtor 1 only ☐ Debtor 2 only		Type of NONPRIORITY unsecu	ıred claim:	
	Debtor 1 and Debtor 2 only		Student loans		
	At least one of the debtors and another		Obligations arising out of a separ that you did not report as priority	9	
	☐ Check if this claim is for a community debt		Debts to pension or profit-sharing		
	Is the claim subject to offset?		Other. Specify		
	✓ No				
	Yes				
4.24	Hd Credit		Last 4 digits of account number	20100616272899	\$0.00
	Nonpriority Creditor's Name		When was the debt incurred?	2010	Ψ <u>σ.σ.σ.</u>
	222 W Adams, Suite 2000				
	Number Street		As of the date you file, the claim	is: Check all that apply	
	Chicago IL	60606	☐ Contingent	ior oncor an that approx	
	City State Who incurred the debt? Check one.	ZIP Code	Unliquidated		
	who incurred the debt? Check one. Debtor 1 only		Disputed		
	Debtor 2 only		Type of NONPRIORITY unsecu	ured claim:	
	Debtor 1 and Debtor 2 only		☐ Student loans		
	At least one of the debtors and another		Obligations arising out of a separ		
	☐ Check if this claim is for a community debt		that you did not report as priority Debts to pension or profit-sharing		
	Is the claim subject to offset?		✓ Other. Specify	<u>.</u>	
	☑ No				
	Yes				

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4	liet	Valle	NONDE	llne	hariinad	Clai	imo

3.	Do any creditors have nonpriority unsecured claims a No. You have nothing to report in this part. Submit this Yes		
4.	nonpriority unsecured claim, list the creditor separately fo	chabetical order of the creditor who holds each claim. If a creditor has reach claim. For each claim listed, identify what type of claim it is. Do not ular claim, list the other creditors in Part 3.If you have more than three no	list claims already
			Total claim
4.25	Hd Credit	Last 4 digits of account number 20140822955201	
	Nonpriority Creditor's Name		\$ <u>4,927.00</u>
	222 W Adams, Suite 2000	When was the debt incurred? 2014	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
	Chicago IL 60606	_	
	City State ZIP Co	de	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
		that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	☐ Check if this claim is for a community debt	Other. Specify	
	Is the claim subject to offset? No		
	Yes		
4.26		Last 4 digits of account number 414720*****	_{\$} Unknown
		When was the debt incurred? 2014	
	Nonpriority Creditor's Name Po Box 15298		
	Number Street	As of the date you file, the claim is: Check all that apply.	
	Wilmington DE 19850		
	City State ZIP Co Who incurred the debt? Check one.	de Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	☐ Student loans	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
		that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	Check if this claim is for a community debt	✓ Other. Specify	
	Is the claim subject to offset?		
	Yes		
4.27	Jpmcb Card	Last 4 digits of account number 438857******	4 400 00
	Nonpriority Creditor's Name	When was the debt incurred? 2012	\$ <u>4,462.00</u>
	Po Box 15298		
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
	Wilmington DE 19850 City State ZIP Co	Contingent	
	Who incurred the debt? Check one.	Unliquidated	
	Debtor 1 only	Disputed	
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim: ☐ Student loans	
	At least one of the debtors and another	☐ Obligations arising out of a separation agreement or divorce	
	☐ Check if this claim is for a community debt	that you did not report as priority claims	
	•	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
	Is the claim subject to offset? No	Culci. Specify	
	Yes		

Liet	All of	Valir	NONDE	IORITY	Unsecured	Claime

3.	Do any creditors have nonpriority unsecured claims against you \(\subseteq No. You have nothing to report in this part. Submit this form to the				
	Yes	e court with your other scriedules.			
4.	nonpriority unsecured claim, list the creditor separately for each claim	order of the creditor who holds each claim. If a creditor has more than one n. For each claim listed, identify what type of claim it is. Do not list claims already list the other creditors in Part 3.If you have more than three nonpriority unsecured			
		Total claim			
4.28	Jpmcb Card	Lost 4 digits of account number 126681*****			
	Nonpriority Creditor's Name	<u>\$_0.00</u>			
	Po Box 15298	When was the debt incurred? 2012			
	Number Street				
		As of the date you file, the claim is: Check all that apply.			
	Wilmington DE 19850				
	City State ZIP Code	☐ Contingent			
	Who incurred the debt? Check one.	Unliquidated			
	Debtor 1 only	Disputed			
	Debtor 2 only	Type of NONPRIORITY unsecured claim:			
	Debtor 1 and Debtor 2 only	Student loans			
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce			
		that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts			
	☐ Check if this claim is for a community debt	✓ Other. Specify			
	Is the claim subject to offset?	Other. Opeony			
	✓ No				
	Yes				
4.29	Kohls/Capone	Last 4 digits of account number 639305*****9494 \$0.00			
		When was the debt incurred? 2010			
	Nonpriority Creditor's Name	When was the dest mounted: 2010			
	N56 W 17000 Ridgewood Dr				
	Number Street	As of the date you file, the claim is: Check all that apply.			
	Menomonee Falls WI 53051	Contingent			
	City State ZIP Code Who incurred the debt? Check one.	Unliquidated			
	Debtor 1 only	Disputed			
	Debtor 2 only	Type of NONPRIORITY unsecured claim:			
	Debtor 1 and Debtor 2 only	☐ Student loans			
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce			
		that you did not report as priority claims			
	☐ Check if this claim is for a community debt	☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify			
	Is the claim subject to offset?	Other. Specify			
	✓ No				
	Yes				
4.30	Navy Fcu	Last 4 digits of account number XXXXXX*****X6253			
		\$ <u>12,001.00</u>			
	Nonpriority Creditor's Name	When was the debt incurred? 2012			
	One Security Place				
	Number Street	As of the date you file, the claim is: Check all that apply.			
	Merrifield VA 22119	- <u> </u>			
	City State ZIP Code	☐ Contingent			
	Who incurred the debt? Check one.	Unliquidated			
	☑ Debtor 1 only	Disputed			
	Debtor 2 only	Type of NONPRIORITY unsecured claim:			
	☐ Debtor 1 and Debtor 2 only	☐ Student loans			
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce			
	Check if this claim is for a community daht	that you did not report as priority claims			
	LI Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts			
	Is the claim subject to offset?	✓ Other. Specify			
	✓ No				
	Yes				

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+ つ・	Lict All of	VALLE NAME	DIADITY IInd	secured Claims
1 4.	LISL AII UI	TOUL NONE	nionii i oiis	seculeu Cialili

3.	Do any creditors have nonpriority unsecured claims against you No. You have nothing to report in this part. Submit this form to the Yes	
4.	nonpriority unsecured claim, list the creditor separately for each claim	order of the creditor who holds each claim. If a creditor has more than one n. For each claim listed, identify what type of claim it is. Do not list claims already ist the other creditors in Part 3.If you have more than three nonpriority unsecured
		Total claim
4.04	Novy Fodoval Cyllinian	l Otal Claiiii
4.31		Last 4 digits of account number 534625*
	Nonpriority Creditor's Name	<u>\$_0.00</u>
	820 Follin Ln Se	When was the debt incurred? 2012
	Number Street	
		As af the date was file the plains in Object all that and
	Vienna VA 22180	As of the date you file, the claim is: Check all that apply.
	City State ZIP Code	☐ Contingent
	•	☐ Unliquidated
	Who incurred the debt? Check one.	☐ Disputed
	Debtor 1 only	Type of NONPRIORITY unsecured claim:
	Debtor 2 only	☐ Student loans
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce
	At least one of the debtors and another	that you did not report as priority claims
	☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts
	Is the claim subject to offset?	✓ Other. Specify
	✓ No	
	Yes	
4.32	A.L.	Last 4 digits of account number 626074694 \$0.00
4.32	1.0.00	
	Nonpriority Creditor's Name	When was the debt incurred? 2009
	Number Street	As of the date you file, the claim is: Check all that apply.
		Contingent
	City State ZIP Code	Unliquidated
	Who incurred the debt? Check one. Debtor 1 only	Disputed
	Debtor 2 only	Type of NONPRIORITY unsecured claim:
	Debtor 1 and Debtor 2 only	Student loans
	☐ At least one of the debtors and another	Obligations arising out of a separation agreement or divorce
		that you did not report as priority claims
	☐ Check if this claim is for a community debt	 ☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify
	Is the claim subject to offset?	Other. Specify
	✓ No	
	Yes	
4.33	Suntrust Bank	Last 4 digits of account number 65600006564550082
		\$0.00 \$0.00 \$0.00
	Nonpriority Creditor's Name	Wilen was the dept incurred:
	Po Box 3303	
	Number Street	As of the date you file, the claim is: Check all that apply.
	Tampa FL 33601	
	City State ZIP Code	☐ Contingent
	Who incurred the debt? Check one.	Unliquidated
	Debtor 1 only	Disputed
	Debtor 2 only	Type of NONPRIORITY unsecured claim:
	Debtor 1 and Debtor 2 only	Student loans
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce
	☐ Check if this claim is for a community debt	that you did not report as priority claims
	•	Debts to pension or profit-sharing plans, and other similar debts
	Is the claim subject to offset?	✓ Other. Specify
	✓ No	
	└ Yes	
	<u>'</u>	

Part 2:	List All of Your NONPRIORITY Unsecured Claims	

3.	Do any creditors have nonpriority unsecured on the No. You have nothing to report in this part. Surely Yes				
4.	List all of your nonpriority unsecured claims in nonpriority unsecured claim, list the creditor separ included in Part 1. If more than one creditor holds claims fill out the Continuation Page of Part 2.	rately for each claim	 For each claim listed, identify what 	at type of claim it is. Do not	list claims already
					Total claim
1 2	Syncb/Bana				Total Claim
4.34			Last 4 digits of account number	447993*****	s Unknown
	Nonpriority Creditor's Name		M/h	2010	\$_OTIKTIOWIT
	4125 Windward Plaza		When was the debt incurred?	2010	
	Number Street				
			A	: Ob	
	Alpharetta GA	30005	As of the date you file, the claim	is: Check all that apply.	
	City State	ZIP Code	☐ Contingent		
	•	ZIF Code	☐ Unliquidated		
	Who incurred the debt? Check one.		Disputed		
	Debtor 1 only		Type of NONPRIORITY unsecu	red claim:	
	Debtor 2 only		Student loans	rea ciaiii.	
	Debtor 1 and Debtor 2 only			otion agreement	
	At least one of the debtors and another		Obligations arising out of a separathat you did not report as priority		
			Debts to pension or profit-sharing		
	☐ Check if this claim is for a community debt		✓ Other. Specify	, plane, and outer enimal debte	
	Is the claim subject to offset?		_ outen open,		
	✓ No				
	Yes				
4.35	Syncb/Bana		Last 4 digits of account number	447993*****	\$ 0.00
	l			2010	•
	Nonpriority Creditor's Name		Tillen was the assembarrou.		
	4125 Windward Plaza				
	Number Street		As of the date you file, the claim	is: Check all that apply.	
	Alpharetta GA	30005	Contingent		
	City State Who incurred the debt? Check one.	ZIP Code	Unliquidated		
	Debtor 1 only		Disputed		
	Debtor 2 only		Type of NONPRIORITY unsecu	red claim:	
	Debtor 1 and Debtor 2 only		☐ Student loans		
	At least one of the debtors and another		Obligations arising out of a separate	· ·	
			that you did not report as priority		
	☐ Check if this claim is for a community debt		Debts to pension or profit-sharing		
	Is the claim subject to offset?		Other. Specify		
	✓ No				
	Yes				
4.36	Syncb/Brdc		Last 4 digits of account number	447993*****	
	j Synco/Brac				\$0.00
	Nonpriority Creditor's Name		When was the debt incurred?	2010	
	Po Box 965005				
	Number Street				
			As of the date you file, the claim	is: Check all that apply.	
	Orlando FL	32896	☐ Contingent		
	City State Who incurred the debt? Check one.	ZIP Code	☐ Unliquidated		
	Debtor 1 only		Disputed		
	Debtor 1 only Debtor 2 only		Type of NONPRIORITY unsecu	red claim:	
			_	viumi	
	Debtor 1 and Debtor 2 only		Student loans	-ti	
	At least one of the debtors and another		Obligations arising out of a separathat you did not report as priority		
	☐ Check if this claim is for a community debt		Debts to pension or profit-sharing		
	Is the claim subject to offset?		Other. Specify	., .,	
	✓ No		. ,		
	Yes				
	1 G3				

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rt 2:	List All of Your NONPRIORITY	Unsecured Claims

3.	Do any creditors have nonpriority unsecured claims against year. No. You have nothing to report in this part. Submit this form to be Yes	
4.	nonpriority unsecured claim, list the creditor separately for each cla	al order of the creditor who holds each claim. If a creditor has more than one aim. For each claim listed, identify what type of claim it is. Do not list claims already n, list the other creditors in Part 3.If you have more than three nonpriority unsecured
		Total claim
1 2	Syncb/Cca	
4.37	1 -	Last 4 digits of account number 601921******8303
	Nonpriority Creditor's Name	0045
	C/O Po Box 965036	When was the debt incurred? 2015
	Number Street	
		As of the date year file the plains in Oberly all the territy
	Orlando FL 32896	As of the date you file, the claim is: Check all that apply.
	City State ZIP Code	− □ Contingent
	•	☐ Unliquidated
	Who incurred the debt? Check one.	☐ Disputed
	Debtor 1 only	Type of NONPRIORITY unsecured claim:
	Debtor 2 only	☐ Student loans
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce
	At least one of the debtors and another	that you did not report as priority claims
	☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts
	·	✓ Other. Specify
	Is the claim subject to offset?	
	✓ No	
4.00	☐ Yes Syncb/Ppmc	504050***** 2.492.00
4.38	Syncb/i pinc	Last 4 digits of account number 521853***** \$3,483.00
	Nonpriority Creditor's Name	— When was the debt incurred? <u>2010</u>
	4125 Windward Plaza	
	Number Street	As of the date you file, the claim is: Check all that apply.
		As of the date you me, the claim is. Check all that apply.
	Alpharetta GA 30005	Contingent
	City State ZIP Code	Unliquidated
	Who incurred the debt? Check one.	Disputed
	☑ Debtor 1 only ☐ Debtor 2 only	Type of NONPRIORITY unsecured claim:
	= '	☐ Student loans
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Obligations arising out of a separation agreement or divorce
	At least one of the debtors and another	that you did not report as priority claims
	☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts
	Is the claim subject to offset?	✓ Other. Specify
	✓ No	
	Yes	
4.39	Syncb/Rmstgo	Last 4 digits of account number 601919******
		J0100
	Nonpriority Creditor's Name	When was the debt incurred? 2013
	C/O Po Box 965036	
	Number Street	As of the date year file the plains in Obselve III that are less
		As of the date you file, the claim is: Check all that apply.
	Orlando FL 32896	Contingent
	City State ZIP Code Who incurred the debt? Check one.	Unliquidated
	☑ Debtor 1 only	Disputed
	☐ Debtor 2 only	Type of NONPRIORITY unsecured claim:
	Debtor 1 and Debtor 2 only	☐ Student loans
	☐ At least one of the debtors and another	Obligations arising out of a separation agreement or divorce
	_	that you did not report as priority claims
	☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts
	Is the claim subject to offset?	Other. Specify
	✓ No	
	Yes	

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Lict	ΛII	٥f	Valle	NON	DDIO	DITV	Hnee	aurad	Cla	ime	

3.	Do any creditors have nonpriority unsecured claims against you No. You have nothing to report in this part. Submit this form to the Yes		
4.	List all of your nonpriority unsecured claims in the alphabetical of nonpriority unsecured claim, list the creditor separately for each claim included in Part 1. If more than one creditor holds a particular claim, liclaims fill out the Continuation Page of Part 2.	. For each claim listed, identify what type of claim it is. Do not	list claims already
			Total claim
4.40	Syncb/Wlmrtd		Total Claim
4.4(Nonpriority Creditor's Name	Last 4 digits of account number 523914*****	_{\$} 0.00
	Nonpriority Creditor's Name	When was the debt incurred? 2011	\$ <u>0.00</u>
	Number Street		
	. Tanibol Gildon		
		As of the date you file, the claim is: Check all that apply.	
		Contingent	
	City State ZIP Code	☐ Unliquidated	
	Who incurred the debt? Check one.	☐ Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	☐ Student loans	
	Debtor 1 and Debtor 2 only	☐ Obligations arising out of a separation agreement or divorce	
	At least one of the debtors and another	that you did not report as priority claims	
	☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	✓ Other. Specify	
	✓ No		
	Yes		
4.4 ¹	Synchrony Banana Republic CC	Last 4 digits of account number 0391	\$3,261.00
		When was the debt incurred? $07/06/2010$	
	Nonpriority Creditor's Name 4125 Windward Plaza		
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
	Alpharetta GA 30005	☐ Contingent	
	City State ZIP Code	☐ Unliquidated	
	Who incurred the debt? Check one.	☐ Disputed	
	☐ Debtor 1 only ☐ Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only Debtor 1 and Debtor 2 only	☐ Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
		that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	☐ Check if this claim is for a community debt	✓ Other. Specify Credit Card Debt	
	Is the claim subject to offset?		
	✓ No		
4.42	Yes	0000	
4.42	Synchrony Bank / Pay Pal Credit Card	Last 4 digits of account number 3939	_{\$} 3,483.00
	Nonpriority Creditor's Name	When was the debt incurred? $05/23/2010$	
	4125 Windward Plaza		
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
	Alpharetta GA 30005	Contingent	
	City State ZIP Code Who incurred the debt? Check one.	Unliquidated	
	Debtor 1 only	☐ Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	☐ Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
	☐ Check if this claim is for a community debt	that you did not report as priority claims	
	·	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Credit Card Debt	
	Is the claim subject to offset? No	Salot. Openly	
	Yes		

Part

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2:	List All of	Your NONPR	IORITY Uns	ecured Claim:

3.	Do any creditors have nonpriority unsecured claims against you have nothing to report in this part. Submit this form to yes	
4.	nonpriority unsecured claim, list the creditor separately for each cla	al order of the creditor who holds each claim. If a creditor has more than one aim. For each claim listed, identify what type of claim it is. Do not list claims already n, list the other creditors in Part 3.If you have more than three nonpriority unsecured
		Total claim
4.43	Td Bank Usa/Targetcred	
4.40	, and the second	Last 4 digits of account number 692607***
	Nonpriority Creditor's Name	When was the debt incurred? 2012
	Po Box 673	when was the debt incurred? <u>2012</u>
	Number Street	
		As of the date you file the claim is Check all that apply
	Minneapolis MN 55440	As of the date you file, the claim is: Check all that apply.
	City State ZIP Code	− □ Contingent
	•	☐ Unliquidated
	Who incurred the debt? Check one.	Disputed
	Debtor 1 only	Type of NONPRIORITY unsecured claim:
	Debtor 2 only	Student loans
	☐ Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce
	☐ At least one of the debtors and another	that you did not report as priority claims
		Debts to pension or profit-sharing plans, and other similar debts
	☐ Check if this claim is for a community debt	Other. Specify
	Is the claim subject to offset?	,
	✓ No	
	Yes	
4.44	Toyota Motor Credit	Last 4 digits of account number 70401264146650001 § 0.00
		— When was the debt incurred? 2010
	Nonpriority Creditor's Name	
	Po Box 9786	_
	Number Street	As of the date you file, the claim is: Check all that apply.
		— — — — — — — — — — —
	Cedar Rapids IA 52409	Contingent
	City State ZIP Code Who incurred the debt? Check one.	Unliquidated
	Debtor 1 only	Disputed
	Debtor 2 only	Type of NONPRIORITY unsecured claim:
	Debtor 1 and Debtor 2 only	☐ Student loans
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce
		that you did not report as priority claims
	☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts
	Is the claim subject to offset?	✓ Other. Specify
	✓ No	
	Yes	
4.45	U S Bank	Last 4 digits of account number 469227*****
	1 03 Balik	\$749.00
	Nonpriority Creditor's Name	When was the debt incurred? 2014
	Po Box 108	
	Number Street	_
		As of the date you file, the claim is: Check all that apply.
	Saint Louis MO 63166	☐ Contingent
	City State ZIP Code Who incurred the debt? Check one.	Unliquidated
	<u> </u>	Disputed
	☑ Debtor 1 only	Type of NONPRIORITY unsecured claim:
	Debtor 2 only	
	Debtor 1 and Debtor 2 only	Student loans
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims
	☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts
	Is the claim subject to offset?	✓ Other. Specify
	No	
	Yes	
	☐ 1 <i>□</i>	

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+ 9 -	Liet All of	Valir	NONPRIORITY	Uneacurad	Claime
	LIST ALL OF	ı oui	NONFINOINI	Uliseculeu	Ciallii

Par	t 2: List All of Your NONPRIOR	ITY Un	secured Claims					
[Do any creditors have nonpriority uns No. You have nothing to report in this Yes							
i i	List all of your nonpriority unsecured on nonpriority unsecured claim, list the cred included in Part 1. If more than one credictaims fill out the Continuation Page of P	itor sepai itor holds	rately for each claim	 For each claim listed, identify wh 	at type of claim	it is. Do not	list claims already	
							Total claim	
4.46	United Consumer Finl S				05004557			
	Nonpriority Creditor's Name			Last 4 digits of account number	65204557		_{\$} 0.00	
	865 Bassett Rd			When was the debt incurred?	2010		*	
	Number Street							
		011		As of the date you file, the claim	is: Check all that	apply.		
		OH	44145	☐ Contingent				
	• •	State	ZIP Code	Unliquidated				
	Who incurred the debt? Check one.			Disputed				
	Debtor 1 only			Type of NONPRIORITY unsecu	ured claim:			
	Debtor 2 only			Student loans				
	Debtor 1 and Debtor 2 only			Obligations arising out of a separ	ration agreement of	or divorce		
	At least one of the debtors and another			that you did not report as priority	claims			
	☐ Check if this claim is for a commun	ity debt		Debts to pension or profit-sharing plans, and other similar debts				
	Is the claim subject to offset?			✓ Other. Specify				
	No							
	Yes							
4.47	Usaa Savings Bank			Last 4 digits of account number	374355****	*019	_{\$} 6,475.00	
				When was the debt incurred?	2013			
	Nonpriority Creditor's Name Po Box 47504							
	Number Street							
	Number Street			As of the date you file, the claim	is: Check all that	apply.		
	San Antonio	TX	78265	☐ Contingent				
		State	ZIP Code	☐ Unliquidated				
	Who incurred the debt? Check one.	Olulo	211 0000	☐ Disputed				
	Debtor 1 only			Type of NONPRIORITY unsecu	ured claim:			
	Debtor 2 only			Student loans				
	Debtor 1 and Debtor 2 only			Obligations arising out of a separation	ration agreement of	or divorce		
	At least one of the debtors and another			that you did not report as priority	claims			
	☐ Check if this claim is for a commun	ity debt		Debts to pension or profit-sharing	g plans, and other	similar debts		
	Is the claim subject to offset?			Other. Specify				
	✓ No							
	Yes							
4.48	Webbank/Dfs			Last 4 digits of account number	687945****	*1856887	7 \$0.00	
	Nonpriority Creditor's Name			When was the debt incurred?	2012		\$ <u>U.UU</u>	
	1 Dell Way			When was the dest mountain.				
	Number Street							
				As of the date you file, the claim	is: Check all that	apply.		
	Round Rock	TX	78682	Contingent				
	City	State	ZIP Code	☐ Unliquidated				
	Who incurred the debt? Check one.			☐ Disputed				
	Debtor 1 only Debtor 2 only			•	ured claim:			
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim: Student loans				
	At least one of the debtors and another				ration agreement o	or divorce		
	_			 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 				
	☐ Check if this claim is for a commun	ity debt		☐ Debts to pension or profit-sharing		similar debts		
	Is the claim subject to offset?			Other. Specify				
	✓ No							
	Yes							

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Part 3: List Others to Be Notified About a Debt That You Already Listed

Name	Line 4.2 of (Check one): □ Part 1: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number 6367 On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.2 of (Check one): □ Part 1: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number 3226 On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.8 of (Check one): □ Part 1: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claims
Street Street Street Street State State ZIP Code	Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number 6367 On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.2 of (Check one): □ Part 1: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number 3226 On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.8 of (Check one): □ Part 1: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured
El Paso TX 79998 City State ZIP Code Bank Of America Name Po Box 982238 Number Street El Paso TX 79998 City State ZIP Code Brclysbankde Name Po Box 26182	Last 4 digits of account number 6367 On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.2 of (Check one): □ Part 1: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number 3226 On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.8 of (Check one): □ Part 1: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured
State ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.2 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number 3226 On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.8 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
Bank Of America Name Po Box 982238 Number Street El Paso TX 79998 City State ZIP Code Brclysbankde Name Po Box 26182	Line 4.2 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number 3226 On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.8 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
Po Box 982238 Number Street El Paso TX 79998 City State ZIP Code Brclysbankde Name Po Box 26182	Line 4.2 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number 3226 On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.8 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
Po Box 982238 Number Street El Paso TX 79998 City State ZIP Code Brclysbankde Name Po Box 26182	Claims Last 4 digits of account number 3226 On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.8 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
El Paso TX 79998 City State ZIP Code Brolysbankde Name Po Box 26182	Claims Last 4 digits of account number 3226 On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.8 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
City State ZIP Code Brolysbankde Name Po Box 26182	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.8 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
Name Po Box 26182	Line 4.8 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured
Po Box 26182	Line 4.8 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured
	☑ Part 2: Creditors with Nonpriority Unsecured
Number Street	· · · · · · · · · · · · · · · · · · ·
Wilmington DE 19899 City State ZIP Code	Last 4 digits of account number
Brclysbankde	On which entry in Part 1 or Part 2 did you list the original creditor?
Name	on which only in rate ror rate 2 and you not the original ordanor.
Po Box 26182	Line 4.8 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured Claims
Wilmington DE 19899 City State ZIP Code	Last 4 digits of account number
<u> </u>	
Citi	On which entry in Part 1 or Part 2 did you list the original creditor?
Po Box 6241	Line 4.14 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	✓ Part 2: Creditors with Nonpriority Unsecured
	Claims
Sioux Falls SD 57117	Last 4 digits of account number
City State ZIP Code	
Dsnb Macys	On which entry in Part 1 or Part 2 did you list the original creditor?
Name	Line 4.20 of (<i>Check one</i>): ☐ Part 1: Creditors with Priority Unsecured Claims
Number Street	✓ Part 2: Creditors with Nonpriority Unsecured
	Claims
City State ZIP Code	Last 4 digits of account number
Jpmcb Card	
Name	On which entry in Part 1 or Part 2 did you list the original creditor?
	Line 4.28 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured
	Claims
City State ZIP Code	Last 4 digits of account number

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Part 3: List Others to Be Notified About a Debt That You Already Listed

Jpmcb Card			On which entry in Part 1 or Part 2 did you list the original creditor?
Name			426
201 N. Walnut St//De1 1027			Line 4.26 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims
Wilmington	DE	19801	Last 4 digits of account number ****
Dity	State	ZIP Code	
Jpmcb Card			On which entry in Part 1 or Part 2 did you list the original creditor?
Name			4 26
201 N. Walnut St//De1 1027			Line $\underline{4.26}$ of (<i>Check one</i>): \square Part 1: Creditors with Priority Unsecured Claims
Number Street			✓ Part 2: Creditors with Nonpriority Unsecured Claims
Wilmington	DE	19801	***
City	State	ZIP Code	Last 4 digits of account number
Navy Fcu			On which entry in Part 1 or Part 2 did you list the original creditor?
Name			
820 Follin Lane Se			Line $\underline{4.30}$ of (<i>Check one</i>): \square Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims
	\/^	22100	***
√ienna ity	VA State	ZIP Code	Last 4 digits of account number
Syncb/Cca			On which entry in Part 1 or Part 2 did you list the original creditor?
lame			4 27
C/O Po Box 965036			Line $\underline{4.37}$ of (<i>Check one</i>): \square Part 1: Creditors with Priority Unsecured Claims
lumber Street			✓ Part 2: Creditors with Nonpriority Unsecured Claims
	FL	32896	Local A districts of account number 2808
City	State	ZIP Code	Last 4 digits of account number
			On which entry in Part 1 or Part 2 did you list the original creditor?
Name			_
			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims
City	State	ZIP Code	Last 4 digits of account number
			On which entry in Part 1 or Part 2 did you list the original creditor?
Name			
Number Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
varriger Sueet			☐ Part 2: Creditors with Nonpriority Unsecured Claims
			Look 4 dinite of account number
City	State	ZIP Code	Last 4 digits of account number
			On which entry in Part 1 or Part 2 did you list the original creditor?
Name			_
Number Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
			☐ Part 2: Creditors with Nonpriority Unsecured Claims
			Oldino
	State	ZIP Code	Last 4 digits of account number
City	State	Zii Oodc	

Part 4:

e Middle Name Last Name

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim	
Total claims	6a. Domestic support obligations	6a.	\$0.00	
from Part 1	6b. Taxes and certain other debts you owe the government	6b.	\$0.00	
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$0.00	į
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	+ \$0.00	
	6e. Total. Add lines 6a through 6d.	6e.	\$0.00	
			Total claim	
Total claims	6f. Student loans	6f.	\$0.00	_
from Part 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00	_
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00	
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	+ \$141,850.00	_
	6j. Total. Add lines 6f through 6i.	6j.	\$141,850.00	_

Fill in this information to identify your case:					
Debtor					
·	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse If filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the Middle District of Florida					
Case number (If known)					

Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or company with whom	you h	ave the contract or lease	State what the contract or lease is for
2.1				
	Name			
	Street			
	City St	tate	ZIP Code	-
2.2				
	Name			
	Street			
	City St	tate	ZIP Code	-
2.3				
	Name			
	Street			
	City St.	tate	ZIP Code	
2.4	•			
	Name			
	Street			
	City St	tate	ZIP Code	
2.5				
	Name			
	Street			
	City St	tate	ZIP Code	-

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Fill i	n this information to identify your case:	
Debto		
Debto	First Name Middle Name Last Name	
	Se, if filing) First Name Middle Name Last Name	
Unite	d States Bankruptcy Court for the: Middle District of Florida	
	number	_
(If kno	own)	Check if this is an amended filing
		amended himg
Offi	cial Form 106H	
Sch	nedule H: Your Codebtors	12/15
are fili and no	otors are people or entities who are also liable for any debts you may have. Be as ing together, both are equally responsible for supplying correct information. If m umber the entries in the boxes on the left. Attach the Additional Page to this pag number (if known). Answer every question.	nore space is needed, copy the Additional Page, fill it out,
	o you have any codebtors? (If you are filing a joint case, do not list either spouse as	a codebtor.)
<u> •</u>		
] Yes Vithin the last 8 years, have you lived in a community property state or territory? vrizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Wash	
<u> •</u>	No. 30 to line 3.	
L	Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?	
	No Yes. In which community state or territory did you live?	Fill in the name and current address of that person.
	Name of your spouse, former spouse, or legal equivalent	
	Number Street	
	City State ZIP Code	
s S	Column 1, list all of your codebtors. Do not include your spouse as a codebtor hown in line 2 again as a codebtor only if that person is a guarantor or cosigner Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule E/F, or Schedule G to fill out Column 2.	. Make sure you have listed the creditor on
	Column 1: Your codebtor	Column 2: The creditor to whom you owe the debt
		Check all schedules that apply:
3.1		Cahadula D. Kaa
	Name	Schedule D, line Schedule E/F, line
	Street	Schedule G, line
3.2	City State ZIP Code	
0.2	Name	Schedule D, line
		Schedule E/F, line
	Street	Schedule G, line
	City State ZIP Code	_
3.3		Schedule D, line
	Name	Schedule E/F, line
	Street	Schedule G, line

ZIP Code

State

City

Fill in this information to identify	your case:						
James Leroy Se	phton Jr						
First Name	Middle Name	Last Name		_			
Debtor 2 (Spouse, if filing) First Name	Middle Name	Last Name		_			
United States Bankruptcy Court for the:	Middle District of Florida						
Case number		,		Check if	this is:		
(If known)				_	mended filing		
					pplement showing post ne as of the following o		
Official Form 106I					DD / YYYY		
Schedule I: You	ir Income			,	55, 1111	12/15	
Be as complete and accurate as possupplying correct information. If you are separated and your spouseparate sheet to this form. On the	ou are married and not filingse is not filingse is not filing with you, of top of any additional pag	ng jointly, and yo do not include info	ur spo ormat	ouse is living with ion about your spe	you, include informatio ouse. If more space is n	n about your spouse. leeded, attach a	
Fill in your employment information.		Debtor 1			Debtor 2 or non-fi	ling spouse	
If you have more than one job, attach a separate page with information about additional employers.	Employment status	Employed Not employed	ed		Employed Not employed	<u> </u>	
Include part-time, seasonal, or self-employed work.		Store Manager In Training			Manager		
Occupation may include student or homemaker, if it applies.	Occupation		CVS Health			ng	
	Employer's name	602 W Main St			6250 LBJ Freeway		
	Employer's address						
		Number Street			Number Street		
							
		Inverness, F	 FL 34		Dallas, TX 7524	40	
		City	State		City	State ZIP Code	
	How long employed the	re? 2 months			·		
Part 2: Give Details About	Monthly Income						
Estimate monthly income as of spouse unless you are separated If you or your non-filing spouse habelow. If you need more space, a	ave more than one employe	r, combine the info					
				For Debtor 1	For Debtor 2 or non-filing spouse		
List monthly gross wages, sale deductions). If not paid monthly,			2.	\$ 3,585.79	\$ 3,818.67	•	
3. Estimate and list monthly over	time pay.		3.	+ \$ 0.00	+ \$0.00		
4. Calculate gross income. Add li	ne 2 + line 3.		4.	\$_3,585.79	\$ 3,818.67		

Official Form 106l Schedule I: Your Income page 1

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		Fo	r Debtor 1			ebtor 2 or ling spouse				
Copy line 4 here	→ 4.	\$	3,585.79	Ì	\$	3,818.67				
5. List all payroll deductions:	7 4.	Ψ_	·····		Ψ		-			
5a. Tax, Medicare, and Social Security deductions	5a.	\$	650.46		Φ.	639.86				
5b. Mandatory contributions for retirement plans	5a. 5b.	ֆ_ \$	0.00	•	Ψ \$	0.00	-			
5c. Voluntary contributions for retirement plans	5c.	Ψ_	0.00	-	Ψ	0.00	-			
5d. Required repayments of retirement fund loans	5d.	Ψ_ \$	0.00	•	Ψ \$	0.00	-			
5e. Insurance	5e.	Ψ_ \$	0.00	•	\$ \$	138.57	-			
5f. Domestic support obligations	5f.	\$_ \$	0.00	•	\$ \$	0.00	-			
5q. Union dues		\$	0.00	•	\$	0.00	_			
5h. Other deductions. Specify: BLTD	5g. 5h.	. —		•	+ s	2.40	-			
Critical Illness	511.	' \$_ \$		•	+	17.78	-			
Ontical limess		Ψ_ \$	· · · · · · · · · · · · · · · · · · ·		\$					
		\$_			\$					
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h	. 6.	\$	650.46		\$	798.61				
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	. o. 7.	Ψ_ \$	2,935.34		Ψ \$	3,020.06				
7. Calculate total monthly take-nome pay. Subtract line of form line 4.	7.	Ψ_			Ψ					
8. List all other income regularly received:										
8a. Net income from rental property and from operating a business, profession, or farm										
Attach a statement for each property and business showing gross										
receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$_	0.00		\$	0.00	_			
8b. Interest and dividends	8b.	\$_	0.00		\$	0.00	_			
8c. Family support payments that you, a non-filing spouse, or a depend regularly receive	ent									
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$_	0.00		\$	0.00	-			
8d. Unemployment compensation	8d.	\$_	0.00		\$	0.00	_			
8e. Social Security	8e.	\$_	0.00		\$	0.00	-			
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assista that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	nce 8f.	\$_	0.00		\$	0.00	_			
8g. Pension or retirement income	90	Φ	0.00		Φ.	0.00				
·	8g.	\$_			Φ		-			
8h. Other monthly income. Specify:	8h.	+ \$_	0.00		+\$_	0.00	_			
9. Add all other income . Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$_	0.00		\$	0.00	_	_		
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10	. \$_	2,935.34	+	\$	3,020.06	_ =	\$	5,955.	40
11. State all other regular contributions to the expenses that you list in Scho	edule :	J.								
Include contributions from an unmarried partner, members of your household, friends or relatives.	•		·							
Do not include any amounts already included in lines 2-10 or amounts that are		vailabl	e to pay expe	nses	listed				0	.00
Specify:							1. +	<u>\$</u>		
12. Add the amount in the last column of line 10 to the amount in line 11. The					-		2	\$	5,955.	40
Write that amount on the Summary of Your Assets and Liabilities and Certain	Statis	ucai in	iormation, it it	арр	iles	1	2.		bined	ome
13. Do you expect an increase or decrease within the year after you file this No.	form'	?							•	
☐ Yes. Explain:										

Fill in this information to identify y	our case:			
Debtor 1 James Leroy Sephton Jr		Check if this	ie·	
First Name Debtor 2	Middle Name Last Name			
(Spouse, if filing) First Name	Middle Name Last Name	An amend	ned liling ment showing postp	etition chapter 13
United States Bankruptcy Court for the:	Middle District of Florida (S	1	as of the following	
Case number (If known)	<u></u>	MM / DD /	YYYY	
Official Form 106J				
Schedule J: You	ır Expenses			12/15
Be as complete and accurate as pos information. If more space is needed (if known). Answer every question.			· · · · ·	-
Part 1: Describe Your Hous	ehold			
1. Is this a joint case? No. Go to line 2. Yes. Does Debtor 2 live in a se No. Yes. Debtor 2 must file	parate household? Official Form 106J-2, <i>Expenses for S</i> e	eparate Household of Debtor 2.		
Do you have dependents? Do not list Debtor 1 and	✓ No✓ Yes. Fill out this information for	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
Debtor 2. Do not state the dependents' names.	each dependent			No Yes
3. Do your expenses include expenses of people other than yourself and your dependents?	✓ No ☐ Yes			
Part 2: Estimate Your Ongoin	a Monthly Expenses			
Estimate your expenses as of your because as of a date after the bank applicable date. Include expenses paid for with non-such assistance and have included	pankruptcy filing date unless you as ruptcy is filed. If this is a supplement cash government assistance if you	ental <i>Schedule J</i> , check the box a	•	and fill in the
4. The rental or home ownership ex any rent for the ground or lot.	penses for your residence. Include	first mortgage payments and	4. \$	1,000.00
If not included in line 4:				0.00
4a. Real estate taxes			4a. \$	0.00
4b. Property, homeowner's, or rea	nter's insurance		4b. \$	100.00
4c. Home maintenance, repair, a	nd upkeep expenses		4c. \$	50.00
4d. Homeowner's association or o	condominium dues		4d. \$	0.00

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Debtor 1

James Leroy Sephton Jr

First Name Middle Name Last Name

Case number (if known)_____

		Your ex	kpenses
5. Additional mortgage payments for your residence, such as home equity loans	- 5.	\$	0.00
6. Utilities:			
6a. Electricity, heat, natural gas	6a.	\$	320.00
6b. Water, sewer, garbage collection	6b.	\$	26.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	
6d. Other Specify:	6d.	\$	0.00
7. Food and housekeeping supplies	7.	\$	400.00
3. Childcare and children's education costs	8.	\$	0.00
o. Clothing, laundry, and dry cleaning	9.	\$	40.00
Personal care products and services	10.	\$	80.00
. Medical and dental expenses	11.	\$	379.00
Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$	330.00
Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	100.00
Charitable contributions and religious donations	14.	\$	0.00
 Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 			
15a. Life insurance	15a.	\$	0.00
15b. Health insurance	15b.	\$	0.00
15c. Vehicle insurance	15c.	\$	310.00
15d. Other insurance. Specify:	15d.	\$	0.00
Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$	0.00
. Installment or lease payments:			
17a. Car payments for Vehicle 1	17a.	\$	339.82
17b. Car payments for Vehicle 2	17b.	\$	0.00
17c. Other. Specify: Additional Car Payments	17c.	\$	400.00
17d. Other. Specify: Pool	17d.	\$	160.00
Your payments of alimony, maintenance, and support that you did not report as deducted your pay on line 5, Schedule I, Your Income (Official Form 106I).	d from 18.	\$	0.00
Other payments you make to support others who do not live with you.			
Specify:	19.	\$	0.00
Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Yo	our Income.		
20a. Mortgages on other property	20a.	\$	0.00
20b. Real estate taxes	20b.	\$	0.00
20c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
20e. Homeowner's association or condominium dues	20e.	\$	0.00

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Case number (if known)					
· , , , , , , , , , , , , , , , , , , ,					
21	1 ¢	1,350.00			
21.	+\$	58.00			
	+\$				
22a.	\$	6,277.82			
J-2 22c. Add line 22a 22b.	\$				
22c.	\$	6,277.82			
23a.	\$	5,955.40			
23b.	-\$	6,277.82			
	¢	-322.42			
23c.	Φ				
er you file this form?					
	22a. SJ-2 22c. Add line 22a 22b. 22c. 23a. 23b.	21. +\$			

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Fill in this information to identify your case:								
Debtor 1	James Leroy	Sephton Jr	Last Name					
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name					
United States Bankruptcy Court for the Middle District of Florida								
Case number (If known)								

☐ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is N	OT an attorney to help you fill out bankruptcy forms?
☑ No	
☐ Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under penalty of perjury, I declare that I have re that they are true and correct.	ead the summary and schedules filed with this declaration and
V /a/ Jamas Lausy Cambian In	*
/s/ James Leroy Sephton Jr	
Signature of Debtor 1	Signature of Debtor 2
Date 08/02/2019	Date
MM / DD / YYYY	MM / DD / YYYY

btor 2 ouse, if filing)	First Name	Midd	lle Name	Last Name					
ouse, if filing) is	First Name								
		Midd	ile Name	Last Name					
	ankruptcy Court for th	e: Middle D	istrict of Florid	a					
								-	_
nown)								L	☐ Check if this is a amended filing
									amended illing
icial F	orm 107								
iteme	ent of Fina	ancia	I Affair	rs for In	dividua	ls Filing f	or Ban	kruptcy	4/1
complete	and accurate as	possible	. If two marr	ied people are	filing togethe	r, both are equall	y responsib	le for supplyin	g correct
No Yes. Lis	last 3 years, have		-		-				
Debto	or 1:			Dates Debt lived there	or 1 Debtor	2:			Dates Debtor 2 lived there
					Sam	ne as Debtor 1			Same as Debtor
2433	3			From 04/2	<u>3/20</u> 16				From
Numb	ber Street				Nun 8/2018	nber Street			То
Wen	tworth St								
Hous	ston	TX	77004						
City		State	ZIP Code	-	City		State 2	IP Code	
					Sam	ne as Debtor 1			Same as Debtor
4927	' Charriton Dr			From 00/00	/0010				From
Numb					3/2018 Nun	nber Street			
				To 08/29	<u>1/20</u> 18				То
		T)/	77000	-					
Hous	nton	TX	77039						
		you lived	n the last 3 y	Dates Debt	or 1 Debtor	2:			lived there

Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

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James Leroy Sephton Jr Debtor 1 Case number (if known) Part 2: **Explain the Sources of Your Income** 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. ☐ No ✓ Yes. Fill in the details. Debtor 2 Debtor 1 Sources of income Gross income Sources of income Gross income Check all that apply. (before deductions and (before deductions and Check all that apply. exclusions) exclusions) Wages, commissions. ■ Wages, commissions, From January 1 of current year until \$13,472.44 bonuses, tips bonuses, tips the date you filed for bankruptcy: Operating a business ☐ Operating a business Wages, commissions, ☐ Wages, commissions, For last calendar year: bonuses, tips \$9,850.00 bonuses, tips (January 1 to December 31, 2018 Operating a business Operating a business Wages, commissions, ■ Wages, commissions, For the calendar year before that: bonuses, tips bonuses, tips \$80,477.00 (January 1 to December 31, 2017 Operating a business Operating a business 5. Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. ☐ Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Gross income from Sources of income Gross income from each source each source Describe below. Describe below. (before deductions and (before deductions and exclusions) exclusions) From January 1 of current year until the date you filed for bankruptcy: For last calendar year: (January 1 to December 31, For the calendar year before that: (January 1 to December 31,

Debtor 1 James Leroy Sephton Jr

oarries Lei	by depinent of		Case number
First Name	Middle Name	Last Name	

Part 3:	List C	Certain Payme	ents You I	Made Before	You Filed	for Bankruptcy					
6. Are eith	her Deb	otor 1's or Debt	or 2's debts	s primarily co	nsumer debt	s?					
☐ No.	"incur	red by an individ	dual primaril	y for a person	al, family, or h	bts. Consumer debts are cousehold purpose." ay any creditor a total of	e defined in 11 U.S.C. § 101(8) as			
		-	siore you me	eu ioi balikiup	icy, did you pe	ay arry creditor a total or	φ0,025 Of IIIOTE!				
	∐ N	o. Go to line 7.									
	Yes. List below each creditor to whom you paid a total of \$6,825* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.										
	* Sub	ject to adjustme	nt on 4/01/2	22 and every 3	years after th	at for cases filed on or a	fter the date of adjustment.				
✓ Yes	s. Debt o	or 1 or Debtor 2	or both ha	ve primarily o	consumer del	bts.					
						ay any creditor a total of	\$600 or more?				
	V N	o. Go to line 7.									
	☐ Ye	creditor. Do i	not include	payments for o	domestic supp	\$600 or more and the to ort obligations, such as by for this bankruptcy cas					
					Dates of payment	Total amount paid	Amount you still owe	Was this payment for			
						\$	\$	☐ Mortgage			
	Ī	Creditor's Name						☐ Car			
	i	Number Street						☐ Credit card			
	'	Number Street						Loan repayment			
	-							☐ Suppliers or vendors			
	7	City	State	ZIP Code				Other			
	_	Oity	State	ZIF Code							
						\$	\$				
	-	Creditor's Name				Ψ		☐ Mortgage ☐ Car			
								☐ Credit card			
	Ī	Number Street						Loan repayment			
	-							☐ Suppliers or vendors			
								Other			
	(City	State	ZIP Code							
	_										
						\$	\$	☐ Mortgage			
	Ī	Creditor's Name						☐ Car			
	;	Number Street						Credit card			
		Number Street						Loan repayment			
	-							Suppliers or vendors			
	-	0:1						Other			
	(City	State	ZIP Code							

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Case number (if known)_

James Leroy Sephton Jr

Middle Name

Last Name

Debtor 1

7.	Insid corpo agen such	in 1 year before you filed for bankruptcy, dic lers include your relatives; any general partners prations of which you are an officer, director, pe it, including one for a business you operate as as child support and alimony.	s; relatives of any gerson in control, or	eneral partners; pa owner of 20% or m	artnerships of which nore of their voting	you are a general partner; securities; and any managing
	□ Y	es. List all payments to an insider.				
			Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
				c	\$	
		Insider's Name		Φ	Φ	
		Number Street				
		City State ZIP Code	_			
		Insider's Name		\$	\$	
		Number Street				
		Number Sweet				
		City State ZIP Code				
8.	an in Inclu	in 1 year before you filed for bankruptcy, did usider? de payments on debts guaranteed or cosigned No Yes. List all payments that benefited an insider.		yments or transfe	er any property on	account of a debt that benefited
		20. 20. 4 pay	Dates of	Total amount	Amount you still	Reason for this payment
			payment	paid	owe	Include creditor's name
		Insider's Name		\$	\$	
		Number Street				
		City State ZIP Code	_			
				\$	\$	
		Insider's Name				
		Number Street				
		City State ZIP Code	_			

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Within 1 year before you filed for bat List all such matters, including person and contract disputes.					
✓ No✓ Yes. Fill in the details.					
	Nature	of the case	Court or agency		Status of the case
Case title:			Court Name Number Street		Pending On appeal Concluded
Case number	_		City	State ZIP Code	
Case title:			Court Name		Pending On appeal
			Number Street		Concluded
Case number	_		City	State ZIP Code	
Check all that apply and fill in the deta					
Check all that apply and fill in the deta Do No. Go to line 11.		Describe the property		parnished, attached	I, seized, or levied? Value of the property \$
Check all that apply and fill in the deta No. Go to line 11. Yes. Fill in the information below.		Explain what happen Property was re	ed epossessed. preclosed.		
Check all that apply and fill in the deta No. Go to line 11. Yes. Fill in the information below. Creditor's Name	ills below.	Explain what happen Property was re Property was fe Property was g	ed epossessed. preclosed. arnished. ttached, seized, or levied	Date	Value of the property \$\$
Check all that apply and fill in the deta No. Go to line 11. Yes. Fill in the information below. Creditor's Name Number Street City State	ills below.	Explain what happen Property was for Property was g	ed epossessed. preclosed. arnished. ttached, seized, or levied	Date	
Check all that apply and fill in the deta No. Go to line 11. Yes. Fill in the information below. Creditor's Name City State Creditor's Name	ills below.	Explain what happen Property was re Property was g Property was a Describe the property	ed epossessed. preclosed. arnished. ttached, seized, or levied	Date	Value of the property \$ Value of the property
Check all that apply and fill in the deta Ves. Fill in the information below. Creditor's Name Number Street City State	ills below.	Explain what happen Property was for Property was good Property was a Describe the property Explain what happen	ed epossessed. preclosed. arnished. ttached, seized, or levied	Date	Value of the property \$ Value of the property
✓ No. Go to line 11. ✓ Yes. Fill in the information below. Creditor's Name City State Creditor's Name	ills below.	Explain what happen Property was re Property was g Property was a Describe the property	ed epossessed. preclosed. arnished. ttached, seized, or levied ed epossessed. preclosed.	Date	Value of the property \$ Value of the property

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Case number (if known)_

James Leroy Sephton Jr

Debtor 1

FI	rst Name Middle Name Last Na	ame		
11. Within 90	days before you filed for bankrupt	cy, did any creditor, including a bank or financial institution	n, set off any amo	unts from your
accounts	or refuse to make a payment beca	use you owed a debt?		
	ill in the details.			
		Describe the action the creditor took	Date action was taken	Amount
Creditor	's Name		was taken	
Number	Chrock			<u> </u>
Number	Street			
	-			
City	State ZIP Code	Last 4 digits of account number: XXXX-		
12 Within 1 v	rear before you filed for bankruptcy	y, was any of your property in the possession of an assigne	ee for the benefit	of
creditors	a court-appointed receiver, a cust			-
✓ No✓ Yes				
Part 5: Li	st Certain Gifts and Contribut	ions		
13. Within 2 y	ears before you filed for bankrupto	cy, did you give any gifts with a total value of more than \$60	0 per person?	
☑ No				
☐ Yes. F	ill in the details for each gift.			
	with a total value of more than \$600 erson	Describe the gifts	Dates you gave the gifts	Value
Person t	to Whom You Gave the Gift			\$
				\$
				Ψ
Number	Street			
City	State ZIP Code			
	's relationship to you			
. 0.00				
Gifts w	rith a total value of more than \$600 rson	Describe the gifts	Dates you gave the gifts	Value
Person t	o Whom You Gave the Gift			\$
				\$
Number	Street			
City	State ZIP Code			
City	State ZIP Code			
_	's relationship to you			

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James Leroy Sephton Jr

thin 2 years hefore you filed for hankrun	tcy, did you give any gifts or contributions with a total value	of more than ¢£00	to any charity?
l No	tey, the you give any girts of contributions with a total value	on more than \$000	to any charity:
Yes. Fill in the details for each gift or cont	ribution.		
Gifts or contributions to charities that total more than \$600	Describe what you contributed	Date you contributed	Value
Charity's Name			\$
			\$
Number Street			
City State ZIP Code			
thin 1 year before you filed for bankrupt gambling? No Yes. Fill in the details.	cy or since you filed for bankruptcy, did you lose anything b		
thin 1 year before you filed for bankrupt gambling?	cy or since you filed for bankruptcy, did you lose anything b Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	Decause of theft, fire	o, other disaster
thin 1 year before you filed for bankrupt gambling? No Yes. Fill in the details. Describe the property you lost and how	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance		Value of propert
thin 1 year before you filed for bankrupt gambling? No Yes. Fill in the details. Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.		Value of propert
ithin 1 year before you filed for bankrupt gambling? No Yes. Fill in the details. Describe the property you lost and how the loss occurred 7: List Certain Payments or Transithin 1 year before you filed for bankrupt brosulted about seeking bankruptcy or pro-	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Siters Cy, did you or anyone else acting on your behalf pay or transeparing a bankruptcy petition?	Date of your loss	Value of property lost
ithin 1 year before you filed for bankrupt gambling? No Yes. Fill in the details. Describe the property you lost and how the loss occurred 7: List Certain Payments or Transithin 1 year before you filed for bankrupt broulted about seeking bankruptcy or proclude any attorneys, bankruptcy petition pressured.	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Sefers Cy, did you or anyone else acting on your behalf pay or trans	Date of your loss	Value of property lost
ithin 1 year before you filed for bankrupt gambling? No Yes. Fill in the details. Describe the property you lost and how the loss occurred 7: List Certain Payments or Transithin 1 year before you filed for bankrupt ensulted about seeking bankruptcy or proclude any attorneys, bankruptcy petition presented.	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Siters Cy, did you or anyone else acting on your behalf pay or transeparing a bankruptcy petition?	Date of your loss	Value of property lost
thin 1 year before you filed for bankrupt gambling? No Yes. Fill in the details. Describe the property you lost and how the loss occurred T: List Certain Payments or Transithin 1 year before you filed for bankrupt insulted about seeking bankruptcy or proclude any attorneys, bankruptcy petition presulted. No Yes. Fill in the details. Access Counseling Inc.	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. sfers cy, did you or anyone else acting on your behalf pay or transparing a bankruptcy petition? sparers, or credit counseling agencies for services required in your pending agencies.	Date of your loss sfer any property to our bankruptcy.	Value of property lost \$ anyone you
ithin 1 year before you filed for bankrupt gambling? No Yes. Fill in the details. Describe the property you lost and how the loss occurred 7: List Certain Payments or Transithin 1 year before you filed for bankruptonsulted about seeking bankruptcy or proclude any attorneys, bankruptcy petition preclude any attorneys, bankruptcy petition preclude any etc. Fill in the details. Access Counseling Inc. Person Who Was Paid 633 W. 5th Street	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. sfers cy, did you or anyone else acting on your behalf pay or transparing a bankruptcy petition? sparers, or credit counseling agencies for services required in your pending agencies.	Date of your loss sfer any property to our bankruptcy. Date payment or transfer was made	Value of propert lost \$ anyone you Amount of paym

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James Leroy Sephton Jr

	Description and value of any property	v transferred	Date payment or	Amount of
Law Offices of Justin McMurray	Secondary and value of any property	, adiisioirou	transfer was made	payment
Person Who Was Paid	_		03/2019	2,050.00
10175 Fortune Parkway, Suite 603 Number Street	_		00/2010	5
Number Street				5
Jacksonville FL 32256	_			
City State ZIP Code	_			
Email or website address				
Person Who Made the Payment, if Not You	-			
No Yes. Fill in the details.	Description and value of any property	y transferred	Date payment or A	Amount of payr
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		transfer was made	
Person Who Was Paid	_			§
Number Street				
			a	•
	_			5
City State ZIP Code		e transfer any prope	erty to anyone, other than p	property
·	or business or financial affairs? s made as security (such as the granting	of a security interest	t or mortgage on your prope	erty).
ithin 2 years before you filed for bankriansferred in the ordinary course of you clude both outright transfers and transfers on the include gifts and transfers that you have been provided in the details. Unknown	Ir business or financial affairs? Is made as security (such as the granting nave already listed on this statement. Description and value of property transferred	Describe any pro	t or mortgage on your prope perty or payments received exchange	erty).
ithin 2 years before you filed for bankriansferred in the ordinary course of you clude both outright transfers and transfers on tinclude gifts and transfers that you had been seen to be a seen and transfers that you had been seen that you had been seen to be a seen and transfers that you had been seen to be a seen and transfers that you had been seen to be a seen and transfers that you had been seen to be a seen and transfers that you had been seen to be a seen and transfers that you had been seen to be a seen and transfers that you had been seen to be a seen and transfers that you have a seen and transfers that you had been seen and transfers that you have a seen and tran	ir business or financial affairs? s made as security (such as the granting nave already listed on this statement. Description and value of property	Describe any proor debts paid in a Debtor's ex wife divorce settleme an auction compname was on titl	t or mortgage on your prope	Date transf was made
thin 2 years before you filed for bankrinsferred in the ordinary course of you clude both outright transfers and transfers on ot include gifts and transfers that you had been been been been been been been bee	Ir business or financial affairs? Is made as security (such as the granting nave already listed on this statement. Description and value of property transferred	Describe any proor debts paid in a Debtor's ex wife divorce settleme an auction compname was on titl	operty or payments received exchange got this vehicle in their ent. She then sold vehicle to bany in Texas. Debtor's e of vehicle, but Debtor did	Date transfe was made
thin 2 years before you filed for bankriunsferred in the ordinary course of you clude both outright transfers and transfers on tinclude gifts and transfers that you have been been been been been been been be	Ir business or financial affairs? Is made as security (such as the granting nave already listed on this statement. Description and value of property transferred	Describe any proor debts paid in a Debtor's ex wife divorce settleme an auction compname was on titl	operty or payments received exchange got this vehicle in their ent. She then sold vehicle to bany in Texas. Debtor's e of vehicle, but Debtor did	Date transfe was made
ithin 2 years before you filed for bankriansferred in the ordinary course of you clude both outright transfers and transfers on the include gifts and transfers that you have been provided by the include gifts and transfers that you have been provided by the include gifts and transfers that you have been provided by the include gifts and transfers that you have been provided by the include gifts and transfers. Unknown Person Who Received Transfer Number Street	Ir business or financial affairs? Is made as security (such as the granting nave already listed on this statement. Description and value of property transferred	Describe any proor debts paid in a Debtor's ex wife divorce settleme an auction compname was on titl	operty or payments received exchange got this vehicle in their ent. She then sold vehicle to bany in Texas. Debtor's e of vehicle, but Debtor did	Date transfe was made
A State ZIP Code Person's relationship to you None.	Ir business or financial affairs? Is made as security (such as the granting nave already listed on this statement. Description and value of property transferred	Describe any proor debts paid in a Debtor's ex wife divorce settleme an auction compname was on titl	operty or payments received exchange got this vehicle in their ent. She then sold vehicle to bany in Texas. Debtor's e of vehicle, but Debtor did	Date transfe was made

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Case number (if known)_

James Leroy Sephton Jr

Debtor 1

-	nese are o		otcy, did you transfer any propert set-protection devices.)	y to a self-s	ettled trust o	or similar device of wl	nich you
			Description and value of the prope	rty transferre	ed		Date transfer was made
Name of trust							
Within 1 year before y closed, sold, moved, nclude checking, sa	you filed for transfervings, mo	or bankrupto erred? ney market, o	e, Instruments, Safe Deposit cy, were any financial accounts o or other financial accounts; certi tives, associations, and other fin	r instrumen	nts held in yo	ur name, or for your b	
Yes. Fill in the de	taiis.		Last 4 digits of account number	Type of ac		Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
SunTrust Name of Financial Ins 9290 SW State F			XXXX- 0 3 6 6	☐Check	-	02/2019	\$ <u>2.00</u>
Number Street Ocala	FL	34481			market		
SunTrust	State	ZIP Code	XXXX- 0 3 6 6	Other_	ina	02/2019	\$ 193.00
Name of Financial Ins 9290 SW State Ro Number Street			**************************************	Savings Money market Brokerage			<u> </u>
Ocala City	FL State	34481 ZIP Code		Other_			
ecurities, cash, or o	ther valua		year before you filed for bankrup	tcy, any saf	e deposit bo	x or other depository	for
	tails						
•	tails.		Who else had access to it?		Describe the	contents	have it?
⊒ ''°			Who else had access to it?		Describe the	contents	Do you still have it? No Yes

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Debtor 1	James Leroy Se	phton Jr			Case number (if known)	
CDIOI I	First Name Mid	Idle Name	Last	Name	Case number (I Niowi)	
22. Have	you stored property	v in a sto	orage unit o	or place other than your home wi	ithin 1 year before you filed for bankruptcy?	
			J	, , , , , , , , , , , , , , , , , , , ,		
₽.	es. Fill in the details	s .				
ш.				Who else has or had access to it?	P Describe the contents	Do you still
				Willo else has of had access to it:	Describe the contents	have it?
					Star Wars Costumes, Pictures, Clothing,	
	Public Storage				\$1,000.00	☑ No
	Name of Storage Facility	,		Name		☐ Yes
	8717 North Sam Ho	uston Pa	rkway F			
	Number Street	uotorri u	inway L	Number Street		
				City State ZIP Code		
	Humble	TX	77396	•		
	City	State	ZIP Code			
Part 9	Identify Pro	perty Y	ou Hold	or Control for Someone Else	e	
	=		erty that s	omeone else owns? Include any	property you borrowed from, are storing for,	
	old in trust for some	eone.				
~	No					
Ш	Yes. Fill in the detail	ls.				
				Where is the property?	Describe the property	Value
	Owner's Name					\$
				Number Street		
	Number Street			Number Officer		
	City	State	ZIP Code	City State	ZIP Code	
Part 1	O: Give Details	s About	Environi	nental Information		
For the	purpose of Part 10,	the fell	owina dofir	nitiona anniv		
	• •		•			
					concerning pollution, contamination, releases of	
					surface water, groundwater, or other medium,	
	•	•		ng the cleanup of these substanc	,	
■ Site	means any location	n, facility	, or proper	ty as defined under any environr	mental law, whether you now own, operate, or utiliz	.e
it o	r used to own, opera	ite, or ut	ilize it, incl	uding disposal sites.		
■ Haz	ardous material me	ans anvt	hing an en	vironmental law defines as a haz	zardous waste, hazardous substance, toxic	
				contaminant, or similar term.	turdous waste, mazaraous substantes, texte	
		,	ponatant,			
Report	all notices, releases	s, and pr	oceedings	that you know about, regardless	s of when they occurred.	
24. Has	any governmental u	ınit notif	ied you tha	it you may be liable or potentially	y liable under or in violation of an environmental lav	<i>N</i> ?
_						
~	No					
	Yes. Fill in the detail	ls.				
				Governmental unit	Environmental law, if you know it	Date of notice
				- Coronination unit		01 1101106
					_	
	Name of site			Governmental unit		
	Number Street			Number Street		
					_	
				City State ZIP Code		
	City	State 2	ZIP Code			

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Case number (if known)_

James Leroy Sephton Jr

Debtor 1

Filst Name Middle Name Last N	laine			
25. Have you notified any governmental unit of	any release of hazardous materia	1?		
☑ No	,			
Yes. Fill in the details.				
	Governmental unit	Environmental law	, if you know it	Date of notice
Name of site	Governmental unit			
Number Street	Number Street			
	0/4-1- 7/0 0-4-			
	City State ZIP Code			
City State ZIP Code				
26. Have you been a party in any judicial or adm	ninistrative proceeding under any	environmental law	/? Include settlements and or	ders.
☑ No				
Yes. Fill in the details.				
	Court or agency	Nature of the	case	Status of the case
Case title				
	Court Name	_		Pending
				On appeal
	Number Street			Concluded
Case number				
	City State ZIP Cod	le		
Part 11: Give Details About Your Bus	iness or Connections to Any	Business		
27. Within 4 years before you filed for bankrupt	cy, did you own a business or ha	ve any of the follow	ving connections to any busir	iess?
A sole proprietor or self-employed in		-	e or part-time	
☐ A member of a limited liability comp☐ A partner in a partnership	any (LLC) or limited liability partn	ership (LLP)		
A partier in a partiership An officer, director, or managing exe	ecutive of a corporation			
☐ An owner of at least 5% of the voting		ition		
✓ No. None of the above applies. Go to Pa				
Yes. Check all that apply above and fill i		ness.		
	Describe the nature of the business		Employer Identification number	
Business Name			Do not include Social Security n	umber or ITIN.
			EIN:	
Number Street			Dates business existed	
	Name of accountant or bookkeeper		Dates business existed	
	Name of accountant of bookkeeper	·	From To	·
City State ZIP Code				
	Describe the nature of the business	s	Employer Identification number	
Business Name			Do not include Social Security n	umber or IIIN.
			EIN:	
Number Street			Dates business existed	
	Name of accountant or bookkeeper	,		
			From	То
City State ZIP Code				

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	Middle Name	Last I	lame		Case numb	OCI (II KNOWN)	
			Describe the na	ature of the busine	ss	Employer Iden	tification number
						Do not include	Social Security number or ITIN
Business Name						FIN:	
Number Street							
						Dates busines	s existed
			Name of accou	ntant or bookkeep	ar		_
City	State	ZIP Code	Nume of accou	ntant or bookkeep	<u> </u>	From	То
			tcy, did you give	a financial state	ment to anyone a	about your busine	ess? Include all financial
titutions, credito	rs, or other	parties.					
No							
Yes. Fill in the d	etails below	ı.					
		•					
			Date issued				
				_			
Name			MM / DD / YYYY				
Number Street							
City	State	ZIP Code					
City	State	ZIP Code					
City	State	ZIP Code					
City	State	ZIP Code					
		ZIP Code					
City 12: Sign Belo		ZIP Code					
12: Sign Beld	o w						
12: Sign Belo	ow swers on th	is Statemen					nalty of perjury that the
12: Sign Belo	swers on th	is <i>Statemen</i> I understan	d that making a	false statement,		erty, or obtaining	money or property by fraud
12: Sign Belo	swers on th and correct.	is <i>Statemen</i> I understan	d that making a	false statement,	concealing prope	erty, or obtaining	money or property by fraud
12: Sign Belo have read the ans nswers are true a n connection with	swers on th and correct.	is <i>Statemen</i> I understan	d that making a	false statement,	concealing prope	erty, or obtaining	money or property by fraud
12: Sign Belo have read the ans newers are true a connection with 8 U.S.C. §§ 152, 1	swers on th and correct. a bankrupt 341, 1519, a	is <i>Statemen</i> I understan cy case can and 3571.	d that making a tresult in fines u	false statement, p to \$250,000, o	concealing prope	erty, or obtaining	money or property by fraud
12: Sign Belo have read the ans nswers are true a connection with 8 U.S.C. §§ 152, 1	swers on the and correct. a bankrupt 341, 1519, a	is <i>Statemen</i> I understan cy case can and 3571.	d that making a tresult in fines u	false statement, p to \$250,000, o	concealing proper imprisonment fo	erty, or obtaining	money or property by fraud
12: Sign Belo have read the ans newers are true a connection with 8 U.S.C. §§ 152, 1	swers on the and correct. a bankrupt 341, 1519, a	is <i>Statemen</i> I understan cy case can and 3571.	d that making a tresult in fines u	false statement, p to \$250,000, o	concealing proper imprisonment fo	erty, or obtaining	money or property by fraud
have read the answers are true a connection with B U.S.C. §§ 152, 1	swers on th and correct. a bankrupt (341, 1519, a y Sephton J	is <i>Statemen</i> I understan cy case can and 3571.	d that making a tresult in fines u	false statement, p to \$250,000, o	concealing proper imprisonment fo	erty, or obtaining	money or property by fraud
12: Sign Belo have read the ans nswers are true a connection with 8 U.S.C. §§ 152, 1	swers on th and correct. a bankrupt (341, 1519, a y Sephton J	is <i>Statemen</i> I understan cy case can and 3571.	d that making a tresult in fines u	false statement, p to \$250,000, o	concealing proper imprisonment for	erty, or obtaining	money or property by fraud
have read the ananswers are true as a connection with B U.S.C. §§ 152, 1	swers on the and correct. I a bankrupt 341, 1519, a sy Sephton Juster 1	is Statemen I understan cy case can and 3571.	d that making a fresult in fines u	false statement, p to \$250,000, o	concealing proper imprisonment for the concentration of the concentratio	erty, or obtaining or up to 20 years,	money or property by fraud
have read the analysers are true as a connection with B U.S.C. §§ 152, 1 /s/ James Lero Signature of Deb Date 08/02/2019 id you attach add	swers on the and correct. I a bankrupt 341, 1519, a sy Sephton Juster 1	is Statemen I understan cy case can and 3571.	d that making a fresult in fines u	false statement, p to \$250,000, o	concealing proper imprisonment for the concentration of the concentratio	erty, or obtaining or up to 20 years,	money or property by fraucor both.
have read the ananswers are true as a connection with B U.S.C. §§ 152, 1 /s/ James Lero Signature of Deb Date 08/02/2019 id you attach add	swers on the and correct. I a bankrupt 341, 1519, a sy Sephton Juster 1	is Statemen I understan cy case can and 3571.	d that making a fresult in fines u	false statement, p to \$250,000, o	concealing proper imprisonment for the concentration of the concentratio	erty, or obtaining or up to 20 years,	money or property by fraucor both.
have read the analysers are true as a connection with B U.S.C. §§ 152, 1 /s/ James Lero Signature of Deb Date 08/02/2019 id you attach add	swers on the and correct. I a bankrupt 341, 1519, a sy Sephton Juster 1	is Statemen I understan cy case can and 3571.	d that making a fresult in fines u	false statement, p to \$250,000, o	concealing proper imprisonment for the concentration of the concentratio	erty, or obtaining or up to 20 years,	money or property by fraucor both.
have read the ansuswers are true as a connection with B U.S.C. §§ 152, 1 /s/ James Lero Signature of Deb Date 08/02/2019 id you attach add No Yes	swers on the and correct. a bankrupt 341, 1519, a sy Sephton Jutor 1	is Statemen I understan cy case can and 3571.	d that making a result in fines u	false statement, p to \$250,000, o	concealing proper imprisonment for the proper section of the prope	erty, or obtaining or up to 20 years, 	money or property by fraucor both.
have read the ansuswers are true as a connection with B U.S.C. §§ 152, 1 /s/ James Lero Signature of Deb Date 08/02/2019 id you attach add No Yes id you pay or agr	swers on the and correct. a bankrupt 341, 1519, a sy Sephton Jutor 1	is Statemen I understan cy case can and 3571.	d that making a result in fines u	false statement, p to \$250,000, o	concealing proper imprisonment for the concentration of the concentratio	erty, or obtaining or up to 20 years, 	money or property by fraucor both.
have read the ansassers are true as a connection with B U.S.C. §§ 152, 1 S /s/ James Lero Signature of Deb Date 08/02/2019 id you attach add No Yes No Yes	swers on the and correct. a bankrupt (341, 1519, and total) y Sephton Justor 1 ditional page	is Statemen I understan cy case can and 3571. es to Your S	tatement of Fina	false statement, p to \$250,000, o	concealing proper imprisonment for the concealing proper imprisonment for the concentration of the concentration o	erty, or obtaining or up to 20 years, or up to 20 y	money or property by fraucor both.

Fill in this information to identify your case:				
Debtor 1	James Leroy Seph			
20210.	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States I	Bankruptcy Court fo	or the Middle District of Florida		
Case number			\/	
(If known)			_	

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

For any creditors that you listed in Part 1 of <i>Schedule D: C</i> information below.	Creditors Who Have Claims Secured by Property (Offic	ial Form 106D), fill in the
Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's CarMax Auto Finance	☐ Surrender the property.	✓ No
Description of 2015 Hyundai Veloster property securing debt:	 □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: 	Yes
Creditor's name: Description of property securing debt:	☐ Surrender the property. ☐ Retain the property and redeem it. ☐ Retain the property and enter into a Reaffirmation Agreement. ☐ Retain the property and [explain]:	□ No □ Yes
Creditor's name: Description of property securing debt:	□ Surrender the property. □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]:	□ No □ Yes
Creditor's name: Description of property securing debt:	☐ Surrender the property. ☐ Retain the property and redeem it. ☐ Retain the property and enter into a Reaffirmation Agreement. ☐ Retain the property and [explain]:	□ No □ Yes

12/15

Debtor James Leroy Sephton Jr

Case number (If known)_____

Describe your unexpired personal property leases	Will the lease be assumed?
essor's name:	□No
Description of leased roperty:	Yes
essor's name:	□No
Description of leased roperty:	□Yes
essor's name:	□No
Description of leased roperty:	□Yes
essor's name:	□No
Description of leased roperty:	∐Yes
essor's name:	□No
Description of leased roperty:	□Yes
essor's name:	□No
Description of leased roperty:	☐Yes
essor's name:	□No
Description of leased roperty:	□Yes
3: Sign Below	

Official Form 108

 $\mathsf{Date} \; \frac{\mathsf{08/02/2019}}{\mathsf{MM} \; / \; \mathsf{DD} \; \; / \; \; \mathsf{YYYY}}$

Date MM / DD / YYYY

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Case 3.13-0K-02310-3A	i Doc'i Filed 00/0	32/19 Fage	00 01 00
Fill in this information to identify your case:			nly as directed in this form and in
Debtor 1 James Leroy Sephton Jr First Name Middle Name	Last Name	Form 122A-1Sup	р:
Debtor 2		l	presumption of abuse.
(Spouse, if filing) First Name Middle Name United States Bankruptcy Court for the Middle District of Florida	Last Name	abuse applie	ion to determine if a presumption of es will be made under <i>Chapter 7</i> <i>Calculation</i> (Official Form 122A–2).
Case number(If known)	_		Test does not apply now because of itary service but it could apply later.
		☐ Check if this	is an amended filing
Official Forms 1004 1			-
Official Form 122A—1			
Chapter 7 Statement of Your	Current Month	ly Income	12/15
Be as complete and accurate as possible. If two married properties is needed, attach a separate sheet to this form. Includeditional pages, write your name and case number (if kn do not have primarily consumer debts or because of qual Abuse Under § 707(b)(2) (Official Form 122A-1Supp) with Part 1: Calculate Your Current Monthly Income	lude the line number to which own). If you believe that you a ifying military service, comple this form.	the additional informate exempted from a	mation applies. On the top of any presumption of abuse because you
1. What is your marital and filing status? Check one only Not married. Fill out Column A, lines 2-11. Married and your spouse is filing with you. Fill out Married and your spouse is NOT filing with you. Your spouse is not filing with you. Your spouse is not legally separated. Fill under penalty of perjury that you and your spouse.	t both Columns A and B, lines 2- fou and your spouse are: gally separated. Fill out both Co ll out Column A, lines 2-11; do no	lumns A and B, lines ot fill out Column B. E	By checking this box, you declare
spouse are living apart for reasons that do not in	nclude evading the Means Test r	equirements. 11 U.S.	.C. § 707(b)(7)(B).
Fill in the average monthly income that you received bankruptcy case. 11 U.S.C. § 101(10A). For example, i August 31. If the amount of your monthly income varied of Fill in the result. Do not include any income amount more income from that property in one column only. If you have	f you are filing on September 15, during the 6 months, add the inco e than once. For example, if both	, the 6-month period one for all 6 months a spouses own the sa	would be March 1 through and divide the total by 6.
		Column A Debtor 1	Column B Debtor 2 or non-filing spouse
Your gross wages, salary, tips, bonuses, overtime, at (before all payroll deductions).	nd commissions	\$ 1,931.07	\$ <u>3,818.67</u>
Alimony and maintenance payments. Do not include p Column B is filled in.	payments from a spouse if	\$_0.00	\$ <u>0.00</u>
4. All amounts from any source which are regularly paid of you or your dependents, including child support. I from an unmarried partner, members of your household, and roommates. Include regular contributions from a spo	nclude regular contributions your dependents, parents,	\$ 0.00	\$ 0.00
5. Net income from operating a business, profession, or farm	Debtor 1 Debtor 2		
Gross receipts (before all deductions)	\$ <u>0.00</u> \$ <u>0.00</u>		
Ordinary and necessary operating expenses	- \$ <u>0.00</u> - \$ <u>0.00</u>		
Net monthly income from a business, profession, or farm	\$0.00 \$ 0.00 Copy	\$_0.00	\$_0.00
Net income from rental and other real property Gross receipts (before all deductions)	Debtor 1 Debtor 2 \$0.00 \$ 0.00		
Ordinary and necessary operating expenses	- \$0.00 - \$ 0.00		

Net monthly income from rental or other real property

7. Interest, dividends, and royalties

\$ 0.00 Copy

\$_0.00

\$ 0.00

\$ 0.00 \$ 0.00

ebtor 1	James Leroy Sephton Jr		Case number (if known)		
	First Name Middle Name Last Name		(
			Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
Une	mployment compensation		\$ 0.00	\$ 0.00	
	not enter the amount if you contend that the amount reer the Social Security Act. Instead, list it here:			·	
F	or you	\$0.00			
F	or your spouse	\$ <u>0.00</u>			
	sion or retirement income. Do not include any amou efit under the Social Security Act.	unt received that was a	<u>\$</u> 0.00	\$0.00	
Do r as a	ome from all other sources not listed above. Specimot include any benefits received under the Social Section victim of a war crime, a crime against humanity, or in prism. If necessary, list other sources on a separate pro	curity Act or payments rece ternational or domestic			
			\$ <u>0.00</u>	\$ <u>0.00</u>	
			\$ <u>0.00</u>	\$ <u>0.00</u>	
To	tal amounts from separate pages, if any.		+ \$0.00	+ \$0.00	
	culate your total current monthly income. Add lines imn. Then add the total for Column A to the total for C	· ·	\$ <u>1,931.07</u>	+ \$3,818.67	= \$5,749.74 Total current monthly income
Part 2	: Determine Whether the Means Test App	lies to You			monany moonic
2. Calc	culate your current monthly income for the year. F	ollow these steps:			
12a.	Copy your total current monthly income from line 1	1	C	opy line 11 here	\$ 5,749.74
	Multiply by 12 (the number of months in a year).				x 12
12b.	The result is your annual income for this part of the	form.		12b.	\$ 68,996.88
3. Calo	culate the median family income that applies to yo	u. Follow these steps:			
Fill i	n the state in which you live.	FL			
Fill i	n the number of people in your household.	2		_	
To f	n the median family income for your state and size of ind a list of applicable median income amounts, go or ructions for this form. This list may also be available a	nline using the link specified	d in the separate	13.	\$_60,400.00
1. Hov	v do the lines compare?				
14a.	Line 12b is less than or equal to line 13. On the t Go to Part 3.	op of page 1, check box 1,	There is no presumption	on of abuse.	
14b.	Line 12b is more than line 13. On the top of page Go to Part 3 and fill out Form 122A–2.	e 1, check box 2, The presu	umption of abuse is det	ermined by Form 122A	-2.
art 3	: Sign Below				
	By signing here, I declare under penalty of perjury	that the information on thi	s statement and in any	attachments is true an	d correct.
	★/s/ James Leroy Sephton Jr	×			
	Signature of Debtor 1		Signature of Debtor 2		
	Date 08/02/2019 MM / DD / YYYY		DateMM / DD / YYYY	/	
	If you checked line 14a, do NOT fill out or file	Form 122∆_2			
	ii you checked line 14a, do NOT lill out of file	VIIII 1667 6.			

Fill in this information to identify your case:					
Debtor 1		y Sephton Jr			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States E	Bankruptcy Court f	or the: Middle District of Florida	(Sidie)		
Case number			(Olalo)		
(If known)			_		

Check the appropriate box as directed in lines 40 or 42:
According to the calculations required by this Statement:
1. There is no presumption of abuse.
☐ 2. There is a presumption of abuse.
Check if this is an amended filing

Official Form 122A-2

Chapter 7 Means Test Calculation

4/19

To fill out this form, you will need your completed copy of Chapter 7 Statement of Your Current Monthly Income (Official Form 122A-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space

is	neede	d, attach a separate sheet to this form. Include the line number to trite your name and case number (if known).			
Pa	art 1:	Determine Your Adjusted Income			
1.	Сору	your total current monthly income	Copy line 11 from Offici	al Form 122A-1 here →1. \$_	5,749.74
2.	Did y	ou fill out Column B in Part 1 of Form 122A–1?			
	☐ N	o. Fill in \$0 for the total on line 3.			
	✓ Y	es. Is your spouse filing with you?			
	V	No. Go to line 3.			
		Yes. Fill in \$0 for the total on line 3.			
3.	On lin used t	t your current monthly income by subtracting any part of your spehold expenses of you or your dependents. Follow these steps: e 11, Column B of Form 122A-1, was any amount of the income your or the household expenses of you or your dependents? b. Fill in 0 for the total on line 3. es. Fill in the information below:			
		State each purpose for which the income was used For example, the income is used to pay your spouse's tax debt or to support people other than you or your dependents	Fill in the amount you are subtracting from your spouse's income		
		Spouse Car payment	\$ <u>400.00</u>		
			\$ <u>0.00</u>		
			+ \$0.00		
		Total	\$ <u>400.00</u>	Copy total here → -\$	100.00
4.	Adjus	st your current monthly income. Subtract the total on line 3 from line	e 1.	\$ 5	5,349.74

Debtor 1

James Leroy Sephton Jr
First Name Middle Name Last Name

Case number (if known)_____

Part 2:

Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not deduct any amounts that you subtracted from your spouse's income in line 3 and do not deduct any operating expenses that you subtracted from income in lines 5 and 6 of Form 122A–1.

If your expenses differ from month to month, enter the average expense.

Whenever this part of the form refers to you, it means both you and your spouse if Column B of Form 122A-1 is filled in.

5. The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

2

National Standards

You must use the IRS National Standards to answer the guestions in lines 6-7.

6. **Food, clothing, and other items:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.

\$1,288.00

7. **Out-of-pocket health care allowance:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories—people who are under 65 and people who are 65 or older—because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

People who are under 65 years of age

7a. Out-of-pocket health care allowance per person

_{\$} 55.00

7b. Number of people who are under 65

χ2

7c. Subtotal. Multiply line 7a by line 7b.

\$ 110.00 Copy here →

\$110.00

People who are 65 years of age or older

7d. Out-of-pocket health care allowance per person

_{\$}114.00

7e. Number of people who are 65 or older

Χ

7f. Subtotal. Multiply line 7d by line 7e.

\$0.00

Copy here \rightarrow + \$0.00

g. Total. Add lines 7c and 7f.....

\$ 110.00

Copy total here → \$110.00

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ocal Standards You must use the IRS Local Standards	to answer the questions	in lines 8-15.			
ased on information from the IRS, the U.S. Trustee Progra	am has divided the IRS	S Local Standar	d for housing f	or bankruptcy	
Housing and utilities – Insurance and operating expense Housing and utilities – Mortgage or rent expenses	es				
answer the questions in lines 8-9, use the U.S. Trustee F	Program chart.				
of find the chart, go online using the link specified in the separa his chart may also be available at the bankruptcy clerk's office		orm.			
Housing and utilities – Insurance and operating expense dollar amount listed for your county for insurance and opera		f people you ent	ered in line 5, fill	in the \$ 524	4.00
Housing and utilities – Mortgage or rent expenses:					
9a. Using the number of people you entered in line 5, fill in t for your county for mortgage or rent expenses.	he dollar amount listed	9a.	\$ <u>810.00</u>	_	
9b. Total average monthly payment for all mortgages and of	ther debts secured by y	our home.			
To calculate the total average monthly payment, add all contractually due to each secured creditor in the 60 mor bankruptcy. Then divide by 60.					
Name of the creditor	Average monthly payment				
	\$				
	\$				
	+ \$ 0.00				
Total average monthly payment	\$ <u>0.00</u>	Copy here	<u>\$0.00</u>	Repeat this amount on line 33a.	
9c. Net mortgage or rent expense.		_		\neg	
Subtract line 9b (total average monthly payment) from rent expense). If this amount is less than \$0, enter \$0.	line 9a (<i>mortgage or</i>	9c.	\$ <u>810.00</u>	Copy <u>\$</u> 810	0.00
If you claim that the U.S. Tructoe Brogram's division of	the IPS I east Standar	d for housing is	incorrect and	affects \$ 0.0	n
If you claim that the U.S. Trustee Program's division of the calculation of your monthly expenses, fill in any add Explain			s incorrect and	anects \$ 0.0	
why:					
Local transportation expenses: Check the number of vehi	alaa far which you alaim	an ownorchin c	or operating expe	nnco	

12. **Vehicle operation expense:** Using the IRS Local Standards and the number of vehicles for which you claim the operating expenses, fill in the *Operating Costs* that apply for your Census region or metropolitan statistical area.

\$420.00

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James Lerov Sephton Jr. Debtor 1

anics L	cidy depilien	O1	
iret Name	Middle Name	Last Name	

Case number (if known)

13.	. Vehicle ownership or lease expense: Using the IRS Local Standards, calculate the net ownership or lease expense for
	each vehicle below. You may not claim the expense if you do not make any loan or lease payments on the vehicle. In
	addition, you may not claim the expense for more than two vehicles.

Vehicle 1

2015 Hyundai Veloster Describe Vehicle 1:

NADA Value

Ownership or leasing costs using IRS Local Standard

\$ 508.00 13a.

13b. Average monthly payment for all debts secured by Vehicle 1.

Do not include costs for leased vehicles.

To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you filed for bankruptcy. Then divide by 60.

Name of each creditor for Vehicle 1 Average monthly payment CarMax Auto Finance \$ 339.82 \$ 0.00 Copy \$ 339.82 Total average monthly payment here

13c. Net Vehicle 1 ownership or lease expense Subtract line 13b from line 13a. If this amount is less than \$0, enter \$0.....

Copy net Vehicle 1 \$ 168.18 expense here -

Repeat this

amount on

line 33b.

_{\$} 168.18

Vehicle 2

Describe Vehicle 2:

13d. Ownership or leasing costs using IRS Local Standard

\$ 508.00 13d.

\$ 339.82

13e. Average monthly payment for all debts secured by Vehicle 2. Do not include costs for leased vehicles.

Name of each creditor for Vehicle 2 Average monthly payment \$ 0.00 \$ 0.00 Repeat this Copy \$ 0.00 \$0.00 Total average monthly payment amount on here 👈 line 33c. Copy net 13f. Net Vehicle 2 ownership or lease expense Vehicle 2 0.00

14. Public transportation expense: If you claimed 0 vehicles in line 11, using the IRS Local Standards, fill in the

Public Transportation expense allowance regardless of whether you use public transportation.

Subtract line 13e from 13d. If this amount is less than \$0, enter \$0.....

\$ 0.00

\$0.00

expense

here ...

15. Additional public transportation expense: If you claimed 1 or more vehicles in line 11 and if you claim that you may also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may not claim more than the IRS Local Standard for Public Transportation.

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James Leroy Sephton Jr Debtor 1

Last Name

Case number (if known)_

Other Necessary Expenses In addition to the expense deductions listed above, you are allowed your monthly expenses for the following IRS categories. 16. Taxes: The total monthly amount that you will actually owe for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, I you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes. 17. Involuntary deductions: The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs. Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings. 18. Life insurance: The total monthly payroll deductions that your your own term life insurance. If two married people are filing together, include payments that you make for your spouse's item life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term. 19. Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35. 20. Education: The total monthly amount that you pay for education that is either required: ■ as a condition for your job, or ■ for your physically or mentally challenged dependent child if no public education is available for similar services. 21. Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. Do not include payments for any elementary or secondary school education. 22. Additional health care expenses, excluding insurance costs: The mon				
employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes. 7. Involuntary deductions: The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs. Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings. 18. Life insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filling together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term. 19. Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35. 20. Education: The total monthly amount that you pay for education that is either required: a as a condition for your job, or for your physically or mentally challenged dependent child if no public education is available for similar services. 10.00 11. Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. Do not include payments for any elementary or secondary school education. 12. Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7. Payments for he	Other Necessary Expenses			
union dues, and uniform costs. Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings. 18. Life insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filling spouse's life insurance, or for any form of life insurance other than term. 19. Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35. 20. Education: The total monthly amount that you pay for education that is either required: 1 as a condition for your job, or 1 for your physically or mentally challenged dependent child if no public education is available for similar services. 21. Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. Do not include payments for any elementary or secondary school education. 22. Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7. 23. Optional telephones and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. 24. Add all of the expenses allowed under the IRS exp	employment taxes, social se pay for these taxes. Howeve subtract that number from the	ecurity taxes, and Medicare taxes. You may include the monthly amount withheld from your er, if you expect to receive a tax refund, you must divide the expected refund by 12 and he total monthly amount that is withheld to pay for taxes.		<u>\$_1,391.1</u> 6
18. Life insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filling together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term. 19. Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35. 20. Education: The total monthly amount that you pay for education that is either required: ■ as a condition for your job, or ■ for your physically or mentally challenged dependent child if no public education is available for similar services. 21. Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. Do not include payments for any elementary or secondary school education. 22. Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7. Payments for health insurance or health savings accounts should be listed only in line 25. 23. Optional telephones and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. Do not include payments for basic home telephone, internet and cell phone service. Do not include self-empl	union dues, and uniform cos	sts.		¢ 0 00
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agency, such as spousal or child support payments. Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35. 20. Education: The total monthly amount that you pay for education that is either required: as a condition for your job, or for your physically or mentally challenged dependent child if no public education is available for similar services. 21. Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. Do not include payments for any elementary or secondary school education. 22. Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7. Payments for health insurance or health savings accounts should be listed only in line 25. 3. Optional telephones and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 22A-1, or any amount you previously deducted. 4. 4,980.34	together, include payments	that you make for your spouse's term life insurance. Do not include premiums for life		\$_0.00
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you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 22A-1, or any amount you previously deducted. 24. Add all of the expenses allowed under the IRS expense allowances. \$4,980.34	is required for the health and health savings account. Incl	nd welfare of you or your dependents and that is not reimbursed by insurance or paid by a lude only the amount that is more than the total entered in line 7.		\$ <u>269.00</u>
μ τη	you and your dependents, s service, to the extent necess is not reimbursed by your en Do not include payments for	such as pagers, call waiting, caller identification, special long distance, or business cell phone sary for your health and welfare or that of your dependents or for the production of income, if it mployer. In basic home telephone, internet and cell phone service. Do not include self-employment	+	\$ <u>0.00</u>
	24. Add all of the expenses al Add lines 6 through 23.	llowed under the IRS expense allowances.		\$ <u>4,980.</u> 34

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Debtor 1

James Leroy Sephton Jr

annoo L oro,	Copinion o	!	Case number (if known)	
First Name	Middle Name	Last Name		

Additional Expense Deductions		onal deductions allowed by the Moude any expense allowances liste			
 Health insurance, disability insurance, disability insurance, a dependents. 	55. Health insurance, disability insurance, and health savings account expenses. The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or your dependents.				
Health insurance		\$ <u>138.57</u>			
Disability insurance		<u>\$0.00</u>			
Health savings account	4	<u>\$0.00</u>	_		
Total		_{\$_} 138.57	Copy total here →	<u>\$</u> 138.57	
Do you actually spend this total	amount?		-		
☐ No. How much do you actua ☑ Yes	lly spend?	\$			
26. Continued contributions to the continue to pay for the reasonabl household or member of your imcontributions to an account of a contributions.	e and necessary car mediate family who i	re and support of an elderly, chro is unable to pay for such expense	onically ill, or disabled member of your	<u>\$0.00</u>	
27. Protection against family viole you and your family under the Fa	nce. The reasonably	y necessary monthly expenses the ention and Services Act or other for	nat you incur to maintain the safety of ederal laws that apply.	<u>\$0.00</u>	
By law, the court must keep the r	nature of these expe	enses confidential.			
28. Additional home energy costs on line 8.	. Your home energy	costs are included in your non-m	ortgage housing and utilities allowance		
If you believe that you have home energy costs that are more than the home energy costs included in the non-mortgage housing and utilities allowance, then fill in the excess amount of home energy costs. You must give your case trustee documentation of your actual expenses, and you must show that the additional amount claimed is reasonable and necessary.				\$0.00	
29. Education expenses for dependent children who are younger than 18. The monthly expenses (not more than \$170.83* per child) that you pay for your dependent children who are younger than 18 years old to attend a private or public elementary or secondary school. You must give your case trustee documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in lines 6-23.			\$ <u>0.00</u>		
* Subject to adjustment on 4/01	/22, and every 3 year	ars after that for cases begun on	or after the date of adjustment.		
30. Additional food and clothing expense. The monthly amount by which your actual food and clothing expenses are higher than the combined food and clothing allowances in the IRS National Standards. That amount cannot be more than 5% of the food and clothing allowances in the IRS National Standards. To find a chart showing the maximum additional allowance, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. You must show that the additional amount claimed is reasonable and necessary.			\$ <u>0.00</u>		
	\$1. Continuing charitable contributions. The amount that you will continue to contribute in the form of cash or financial instruments to a religious or charitable organization. 26 U.S.C. § 170(c)(1)-(2).				
32. Add all of the additional expense deductions. Add lines 25 through 31.				<u>\$138.57</u>	

Debtor 1 James Leroy Sephton

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Firet Namo	Middlo	Namo	Last Namo

Deductions for Debt Payment						
33. For debts that are secur	red by an interest in property that ed debt, fill in lines 33a through 33	you own, inc	luding home mo	rtgages, vehicle		
To calculate the total ave	rage monthly payment, add all amou after you file for bankruptcy. Then d	unts that are co	ontractually due to	each secured		
Mortgages on yo	ur home:			Average monthly payment		
				\$ 0.00		
Loans on your fir	et two vehicles:					
-			→	_{\$} 339.82		
				\$ 0.00		
33d. List other secured				\$0.00		
Name of each creditor for secured debt			Does payment include taxes or insurance?			
			No Yes	\$ 0.00		
			No Yes	\$_0.00		
			No Yes	+ \$_0.00		
33e. Total average monthly	y payment. Add lines 33a through 33	3d		. \$339.82	Copy total here	\$ <u>339.82</u>
or other property neces No. Go to line 35. Yes. State any amour listed in line 33,	34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents? ✓ No. Go to line 35. ✓ Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the <i>cure amount</i>). Next, divide by 60 and fill in the information below.					
Name of the creditor	Identify property that secures the debt	Total cure	e	Monthly cure amount		
	the debt	\$	÷ 60 =	\$		
		\$	÷ 60 =	\$		
				φ		
		<u>\$ 0.00</u>	÷ 60 =	+ \$ 0.00	1	
			Total	\$0.00	Copy total here	\$ <u>0.00</u>
35. Do you owe any priority claims such as a priority tax, child support, or alimony — that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507. ✓ No. Go to line 36. ☐ Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19.						
Total amount of	all past-due priority claims			§ 0.00	÷ 60 =	\$0.00
					. 55 –	Ψ <u>σ.σσ</u>

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Debtor 1	James Leroy Sephton Jr First Name Middle Name Last Name	Ca	se number (if known)	
	Are you eligible to file a case under Chapter 13? 11 L. For more information, go online using the link for <i>Bankru</i> instructions for this form. <i>Bankruptcy Basics</i> may also be No. Go to line 37.	ptcy Basics specified in the sep		
Ľ	Yes. Fill in the following information.		0.00	
	Projected monthly plan payment if you were filing	•	\$0.00	
	Current multiplier for your district as stated on the Administrative Office of the United States Courts North Carolina) or by the Executive Office for Un other districts).	(for districts in Alabama and ited States Trustees (for all	x <u>8.8%</u>	
	To find a list of district multipliers that includes you link specified in the separate instructions for this available at the bankruptcy clerk's office.			
	Average monthly administrative expense if you w	vere filing under Chapter 13	\$0.00 Copy total here →	\$0.00
	dd all of the deductions for debt payment. dd lines 33e through 36.			\$339.82
Total	Deductions from Income			
38. A d	dd all of the allowed deductions.			
	py line 24, All of the expenses allowed under IRS pense allowances	\$ <u>4,980.34</u>		
Со	py line 32, All of the additional expense deductions	. \$ 138.57		
Co	py line 37, All of the deductions for debt payment	. + \$_339.82		
Tot	tal deductions	\$ <u>5,458.73</u>	Copy total here →	\$ <u>5,458.73</u>
Part	3: Determine Whether There Is a Presumpt	ion of Abuse		
39. C a	alculate monthly disposable income for 60 months			
39	9a. Copy line 4, adjusted current monthly income	\$ <u>5,349.74</u>		
39	9b. Copy line 38, Total deductions	- _{\$} 5,458.73	-	
39	9c. Monthly disposable income. 11 U.S.C. § 707(b)(2). Subtract line 39b from line 39a.	_{\$_} -108.99	Copy line \$-108.99 39c here → \$-108.99	
	For the next 60 months (5 years)		x 60	
3	9d. Total . Multiply line 39c by 60		39d. \$-6,539.20 Copy line 39d here	\$ <u>-6,539.2</u> 0
40. Fi	The line 39d is less than \$8,175*. On the top of page Part 5.		nere is no presumption of abuse. Go to	
	_		There is a presumption of abuse. You	
	The line 39d is at least \$8,175*, but not more than \$	C		
	* Subject to adjustment on 4/01/22, and every 3 years	s after that for cases filed on or	after the date of adjustment.	

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Debtor 1	James Leroy Sephton Jr First Name Middle Name Last Name	Case number (if known)	
	That reality missile reality Last reality		
41. 41a.	Fill in the amount of your total nonpriority unsecured debt. If you fille Summary of Your Assets and Liabilities and Certain Statistical Information Schedules (Official Form 106Sum), you may refer to line 3b on that form.		
41b	. 25% of your total nonpriority unsecured debt. 11 U.S.C. § 707(b)(2)(A Multiply line 41a by 0.25.		\$
is er	ermine whether the income you have left over after subtracting all allow nough to pay 25% of your unsecured, nonpriority debt. ook the box that applies:	ved deductions	
	Line 39d is less than line 41b. On the top of page 1 of this form, check bo Go to Part 5.	(1, There is no presumption of abuse.	
	Line 39d is equal to or more than line 41b. On the top of page 1 of this for <i>f abuse</i> . You may fill out Part 4 if you claim special circumstances. Then go		
Part 4:	Give Details About Special Circumstances		
	have any special circumstances that justify additional expenses or adable alternative? 11 U.S.C. \S 707(b)(2)(B).	justments of current monthly income for which	there is no
_	Go to Part 5. Fill in the following information. All figures should reflect your average mor for each item. You may include expenses you listed in line 25.	thly expense or income adjustment	
	You must give a detailed explanation of the special circumstances that ma adjustments necessary and reasonable. You must also give your case trus expenses or income adjustments.	ke the expenses or income tee documentation of your actual	
	Give a detailed explanation of the special circumstances	Average monthly expense or income adjustment	
		\$	
		\$	
Part 5:	Sign Below	·	
ruit o.	olgii below		
	By signing here, I declare under penalty of perjury that the information on t	nis statement and in any attachments is true and co	orrect.
	★ /s/ James Leroy Sephton Jr Signature of Debtor 1 Signature	ignature of Debtor 2	
	Orginature of Deptor 1	igriature ur Deblur 2	

 $Date \frac{08/02/2019}{MM \, / \, DD \quad / \, YYYY}$

 $\mathsf{Date}\,\frac{08/02/2019}{\mathsf{MM}\,/\,\mathsf{DD}\,\,/\,\mathsf{YYYY}}$

Amex Po Box 297871 Fort Lauderdale, FL 33329

Bank Of America Po Box 982238 El Paso, TX 79998

Bank of America 4060 Ogletown / Stanton Rd DE5-019-03-07 Newark, DE 19713

Barclays Bank Delaware Po Box 8803 Wilmington, DE 19899

Bbv/Cbna Po Box 6497 Sioux Falls, SD 57117

Bk Of Amer 4909 Savarese Cir Tampa, FL 33634

Bk Of Amer 400 Christiana Rd Newark, DE 19713

Brclysbankde Po Box 26182 Wilmington, DE 19899

Cap One 26525 N Riverwoods Blvd Mettawa, IL 60045

Capital One P.O. Box 85015 Richmond, VA 23285-5075

Capital One Bank Usa N 15000 Capital One Dr Richmond, VA 23238

CarMax Auto Finance 225 Chastain Meadows Ct Kennesaw, GA 30144

Carmax Auto Finance 12800 Tuckahoe Creek Pkw Richmond, VA 23238

Cavalry Portfolio Serv Po Box 27288 Tempe, AZ 85285

Citi Po Box 6241 Sioux Falls, SD 57117

Citi Po Box 6217 Sioux Falls, SD 57117

Citi Shell Po Box 6497 Sioux Falls, SD 57117

CitiBank CBNA 701 E 60th St N Sioux Falls, SD 57104

Comenity Bank/Trek Po Box 182789 Columbus, OH 43218

Discover Fin Svcs Llc Po Box 15316 Wilmington, DE 19850

Discoverbank Pob 15316 Wilmington, DE 19850

Dsnb Macys

Esb/Harley Davidson Cr Po Box 21829 Carson City, NV 89721

FMC - Omaha Service Center P.O. Box 542000 Omaha, NE 68154

Ford Motor Credit Comp Po Box Box 542000 Omaha, NE 68154

Hd Credit 222 W Adams, Suite 2000 Chicago, IL 60606

Jpmcb Card 201 N. Walnut St//De1 1027 Wilmington, DE 19801

Jpmcb Card

Jpmcb Card Po Box 15298 Wilmington, DE 19850

Kohls/Capone N56 W 17000 Ridgewood Dr Menomonee Falls, WI 53051

Navy Fcu One Security Place Merrifield, VA 22119

Navy Fcu 820 Follin Lane Se Vienna, VA 22180

Navy Federal Cr Union 820 Follin Ln Se Vienna, VA 22180

Ntonstmrco

Suntrust Bank Po Box 3303 Tampa, FL 33601

Syncb/Bana 4125 Windward Plaza Alpharetta, GA 30005

Syncb/Brdc Po Box 965005 Orlando, FL 32896

Syncb/Cca C/O Po Box 965036 Orlando, FL 32896 Syncb/Ppmc 4125 Windward Plaza Alpharetta, GA 30005

Syncb/Rmstgo C/O Po Box 965036 Orlando, FL 32896

Syncb/WImrtd

Synchrony Banana Republic CC 4125 Windward Plaza Alpharetta, GA 30005

Synchrony Bank / Pay Pal Credit Card 4125 Windward Plaza Alpharetta, GA 30005

Td Bank Usa/Targetcred Po Box 673 Minneapolis, MN 55440

Toyota Motor Credit Po Box 9786 Cedar Rapids, IA 52409

Oedai Hapids, 17 32403

U S Bank Po Box 108 Saint Louis, MO 63166

United Consumer Finl S 865 Bassett Rd Westlake, OH 44145

Usaa Savings Bank Po Box 47504 San Antonio, TX 78265

Webbank/Dfs
1 Dell Way

Round Rock, TX 78682

United States Bankruptcy Court Middle District of Florida

In re: ^{Ja}	mes Leroy Sephton Jr	Case No.
	Debtor(s)	Chapter 7
	Verificat	tion of Creditor Matrix
	ne above-named Debtor(s) he correct to the best of their ki	nereby verify that the attached list of creditors is nowledge.
Date:	08/02/2019	/s/ James Leroy Sephton Jr Signature of Debtor
		Signature of Joint Debtor

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

- You are an individual filing for bankruptcy, and
- Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11— Reorganization
- Chapter 12— Voluntary repayment plan for family farmers or fishermen
- Chapter 13— Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
Φ0.45	Cition to a
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law.

Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form—sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_form_s.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition* for *Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCreditAndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court

Middle District of Florida

In re	ames Leroy Sephton Jr	
		Case No
Debtor		Chapter_ ⁷
	DISCLOSURE OF COMPENSATION OF ATTORNEY	FOR DEBTOR
abo peti	suant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify the venamed debtor(s) and that compensation paid to me within one year tion in bankruptcy, or agreed to be paid to me, for services rendered debtor(s) in contemplation of or in connection with the bankruptcy	ear before the filing of the d or to be rendered on behalf of
FLAT I	<u>'EE</u>	
For	legal services, I have agreed to accept	\$_2,050.00
	r to the filing of this statement I have received	
Bal	ance Due	\$_0.00
RETAI		
For	legal services, I have agreed to accept a retainer of	\$
The	undersigned shall bill against the retainer at an hourly rate of	\$
_	attach firm hourly rate schedule.] Debtor(s) have agreed to pay all coved fees and expenses exceeding the amount of the retainer.	Court
2. The	source of the compensation paid to me was:	
•	Debtor Other (specify)	
3. The	source of compensation to be paid to me is:	
✓	Debtor Other (specify)	
4. v are 1	I have not agreed to share the above-disclosed compensation with nembers and associates of my law firm.	any other person unless they
	I have agreed to share the above-disclosed compensation with a onembers or associates of my law firm. A copy of the Agreement, to ople sharing the compensation is attached.	-
	turn of the above-disclosed fee, I have agreed to render legal service ruptcy case, including:	e for all aspects of the
a	Analysis of the debtor's financial situation, and rendering advice to	the debtor in determining

- b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

whether to file a petition in bankruptcy;

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B2030 (Form 2030) (12/15)			· ·

d. [Other provisions as needed] Preparation of Petition, attendance at 341 Meeting

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services: Adversary Proceedings, Attendance at 2004 Exams, or hearings based on Objections to Discharge or Objections to Exemption.

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

08/02/2019 /s/ Damien Aranguren, 71401

Date Signature of Attorney

Law Offices of Justin McMurray

Name of law firm 118 W. Fort King Street Ocala, FL 34471 damien@lojmpa.com